

2017

The Annual Review of
TREATMENT EFFECTIVENESS

PUBLISHED DECEMBER 2017

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The Annual Review of
TREATMENT EFFECTIVENESS

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EXECUTIVE SUMMARY

The Texas Juvenile Justice Department (TJJD), since its creation in 2011, has provided the Treatment Effectiveness Report annually to the Texas Legislature. This report serves to examine the effectiveness of the TJJD treatment and rehabilitative programs. The report must address five programs: gender-specific programming for female offenders, sexual behavior treatment, capital and serious violent offender treatment, alcohol and other drug treatment, and the mental health treatment programs. While the law requires TJJD to examine the five specific areas of programming, the success of youth who leave TJJD is influenced by more than their participation in any one program. Therefore, in addition to traditional recidivism measures, the 2017 report includes outcomes related to other programming youth received under the agency's general rehabilitative strategy. The final chapter of this report also serves as the agency's report on Reentry and Reintegration as required by Texas Human Resource Code, Section 245.0635.

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INTRODUCTION

For the 2017 Treatment Effectiveness Report, we will recap several changes to programming and operations that have emerged in the last year, while also evaluating the on-going service provision to youth placed in residential care. TJJD continues to implement evidence-based practices and strives to hone approaches the agency takes to provide youth with the best chances to achieve positive outcomes.

TJJD embarked on a project with outside stakeholders to improve all areas of the agency, with an intent toward developing increasingly safer, developmentally responsive living environments in its programs. This year's report evaluates the agency's progress toward that objective. In recent years, TJJD adopted the Risk Needs Responsivity model to guide decisions in the design of its programming and management of youth in its care. The Risk Needs Responsivity model aims to provide services as close to the youth's home community as possible, offering only necessary treatment to each youth, with type and intensity of treatment to be derived from risk assessments that identify the youth's level of risk to re-offend. Consistent with this model, the decision to place youth into residential secure care occurs only if the youth presents the highest risk to re-offend once back in the community. Lower risk youth are best treated in community based, lower restriction programs, and treated within shorter lengths of stay.

TJJD assesses youth for physical, emotional, educational and treatment needs, to identify their level of risk for re-offense once released to the community, and to determine each youth's readiness to change. TJJD approaches treatment decision making from a three-tiered concept that guides the service dosage chosen for each youth based on his or her response to the services offered to all youth. If the youth struggles to respond to the services provided at the dose offered all youth, the strategies of the second or third tiers are implemented and modified to most appropriately craft services to that youth. The agency uses individualized strategies to assist each youth in preparing to change and to benefit from the treatment offered. The youth's readiness to change is monitored, encouraged, and evaluated throughout his stay with the intent to capture the youth's motivation and support the youth's growth as early as is feasible.

TJJD operates from a Trauma-Informed stance in its care and treatment, providing Trauma-Informed Care training in pre-service and annual training to all employees. Research reveals that ninety three percent of justice involved youth have experienced at least one episode of trauma in his or her history. The average juvenile in the system has experienced six traumatic events. Often, the emotional and cognitive changes the youth experiences as a result of trauma have a profound impact on the youth's ability to function in the correctional environment. The agency strives to address the behavioral and emotional sequelae of the youths' trauma histories by engaging the youth in trauma-informed strategies.

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NEW INITIATIVES

During 2017, the agency continued to strengthen programming available to youth in its care. Under auspices of the Center for Juvenile Justice Reform (CJJR), TJJD developed the Capstone program beginning in late 2015, and has now implemented the program across all secure residential facilities. This initiative, now two years old, was originally designed as an intervention for youth who because they had previously earned their high school diploma or General Equivalency Diploma (GED), exhibited excessive behavioral problems in the school environment. The agency has seen remarkably positive outcomes in the program's short lifespan.

Shortly after inception of the Capstone Program, TJJD participated in CJJR's Youth In Custody Practice Model (YICPM), to explore and employ the most current, evidence-based strategies in juvenile rehabilitation. The agency engaged in this eighteen month effort with technical assistance from CJJR to pilot global change efforts, targeting areas, such as case planning, family engagement, and youth re-entry services.

YICPM workgroups have been meeting since May of 2016. The Practice Model advocates for best practices in all juvenile justice jurisdictions. The Texas team assessed current practices and compared them to the model to identify areas for reform. The model emphasizes use of data and assessment in all decision making throughout the system. The model encourages use of assessment to drive individualization of the choices that facilities make available to youth as interventions, activities and services. The reforms have now evolved into system-wide use of the newly implemented approaches. However, much work remains to be done to accomplish the reforms with fidelity to the Practice Model. The YICPM teams will continue implementation strategies for the next few years as designed. Initial outcomes of the YICPM modifications will be reviewed near the end of this report.

This year, TJJD found an increased need for programs that help youth to manage aggressive behavior and resolve problems surrounding their commission of violent offenses. The agency developed the Violent Offender Program in 2015, and has now implemented it in all locations so that youth have access to the service in the facility closest to their homes. Early outcomes are encouraging. In 2017, the agency also expanded the Capital Offender Program to other facilities to increase treatment access for youth in other areas of the state.

TJJD has enjoyed enormous success and national attention as a result of the Pairing Achievement with Service (PAWS) program in which youth care for a dog during their stay. PAWS provides guidance for youth to train their dogs, but now TJJD has capacity to provide additional training for youth to train service dogs. As such, the dogs can become assistance animals to people with special needs. This year, TJJD expanded PAWS to the Giddings unit, beyond the other three locations where the program already operates. PAWS is available for both male and female youth.

In the latter part of 2017, TJJD launched construction necessary to bring an equine trauma therapy program to the Gainesville campus. Youth will begin to access these services in the next several months.

Finally, while TJJD's mentoring program is not a new initiative, the American Institutes for Research and its subsidiary organization, the National Technical Assistance Center for the Education of Neglected or Delinquent Children and Youth ([NDTAC](#)), profiled TJJD's efforts as a best practice. The federally supported programs featured TJJD's mentor program in a webinar on 8/31/17 attended by approximately 1500 juvenile justice providers, advocates, judges, and educators across the nation.

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YOUTH CHARACTERISTICS

Table A.1 shows an overview of the characteristics of youth committed to TJJD in FY 2017.

YOUTH CHARACTERISTICS: NEW ADMISSIONS FY2017
TABLE A.1

		FEMALES	MALES	ALL
NUMBER OF NEW ADMISSIONS		60	742	802
DETERMINATE SENTENCE	%	7	20	19
OFFENSE HISTORY¹				
COMMITTED FOR FELONY OFFENSE	%	100	100	100
THREE OR MORE FELONY OR MISD REFERRALS	%	63	73	72
TWO OR MORE FELONY OR MISD ADJUDICATIONS	%	65	66	66
TJJD RISK ASSESSMENT SCORE¹				
HIGH	%	7	5	5
MEDIUM	%	57	60	60
LOW	%	37	35	35
SEVERITY OF COMMITTING OFFENSE¹				
HIGH	%	13	30	29
MODERATE	%	70	39	42
LOW	%	17	30	29
PARENTS UNMARRIED, DIVORCED, SEPARATED, OR AT LEAST ONE DECEASED²	%	88	84	84
ON PROBATION AT COMMITMENT	%	77	68	68
PRIOR OUT OF HOME PLACEMENT	%	73	62	63
FAMILY HISTORY OF CRIMINAL INVOLVEMENT	%	60	34	36
NEED FOR TRT BY A LIC OR SPEC TRAINED PROVIDER¹				
CAPITAL SERIOUS VIOLENT TRT				
HIGH NEED	%	10	22	21
MODERATE NEED	%	78	58	60
LOW NEED	%	5	11	10
SEXUAL BEHAVIOR TRT				
HIGH NEED	%	2	12	11
MODERATE NEED	%	0	5	4
LOW NEED	%	25	34	33
ALCOHOL OR OTHER DRUG TRT				
HIGH NEED	%	40	35	35
MODERATE NEED	%	35	44	43
LOW NEED	%	8	10	10

MENTAL HEALTH TRT				
HIGH NEED	%	3	3	3
MODERATE NEED	%	72	34	37
LOW NEED	%	12	22	21
ANY SPECIALIZED TRT NEED	%	100	99	99
MULTIPLE (2 OR MORE) SPECIALIZED TRT NEEDS	%	93	86	87
SUSPECTED HISTORY OF ABUSE OR NEGLECT	%	75	30	34
SPECIAL EDUCATION ELIGIBLE	%	22	28	27
MEDIAN YEARS BEHIND READING ACHIEVEMENT¹		-4.2 years	-3.8 years	-3.8 years
MEDIAN YEARS BEHIND MATH ACHIEVEMENT¹		-5.2 years	-4.9 years	-4.9 years
AGE AT ADMISSION				
12 OR YOUNGER	%	2	1	1
13	%	8	3	3
14	%	12	9	9
15	%	18	23	22
16	%	43	36	37
17	%	17	26	25
18	%	0	3	3

¹ Measures taken at intake.

² Parental marital status data is missing for approximately 20% of youth. Percentages exclude missing data. Percentages may not sum to 100 due to rounding.

In FY 2017, youth characteristics largely remained consistent when compared to FY 2016. TJJD's new admissions decreased from 823 in FY 2016 to 802 in FY 2017, with a slight increase in female admissions. Of the FY 2017 new admissions, approximately 59% were 15-16 years of age. Youth 15-17 years of age comprised 84% of new admissions, which is consistent with 2016. Sixty-eight percent were on probation at the time of commitment, and 63% had a prior out-of-home placement. What is significant about these two figures is that youth entering the custody of TJJD previously have been sanctioned for delinquent conduct, but continued to break the law. Those youth had also been placed outside of their homes previously in an effort to help the youth change unacceptable behavior problems. Now they are committed for care in TJJD.

"Median reading years behind" were slightly higher at 3.8 for 2017. Twenty-eight percent of new admissions require special education services; this is close to triple that of public schools, which typically have 8-10% of youth requiring special education services. What is significant about the larger cohort of youth requiring special education services is that the youth then are more likely to require additional accommodation and assistance to make the same progress their general education peers would make.

Capital and Serious Violent Treatment needs rose six-points from 15% in 2016 to 21% for 2017, indicating a need for expanded treatment services in this area. Sixty-one percent of new commitments had some need for mental health treatment, a six-point increase from 2016. Youth with a moderate need for mental health care increased from 29% to 37%, a trend consistent nationally among delinquent youth. The significance of increased mental health needs is a reflection of the increased incidence of trauma histories noted in the population of youth in the justice system. Ninety-nine percent of youth committed in 2017 had a need for at least one area of specialized treatment and 87% had a need for two or more areas

of specialized treatment. Consequently, TJJD faces the task of expanding the quality and availability of each of the programs.

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GENERAL TREATMENT DESCRIPTION

A key piece of the 2007 effort to reform the Texas juvenile justice system called for the creation of a sound treatment system capable of providing individual youth the assistance and tools they need to leave behind their delinquent ways in order to become productive adults. Specifically, the reform requirements called for the new treatment program to be:

- Youth-centered;
- Evidence based;
- “Flexible” to account for individual youth needs and strengths;
- Implemented by appropriately experienced, trained and licensed staff;
- Accountable for program effectiveness; and
- Fully integrative with other Texas juvenile justice and community services.

Programming is delivered in classes, groups and individual formats addressing identified individual risk and protective factors. Youth attend school, where they focus on increasing their academic and vocational skills for improved opportunities. Positive Behavior Interventions and Supports (PBIS) are used to support positive behaviors in the classroom and on the residential units to address rule violations. Youth also participate in skills building groups, behavior groups, psycho-educational and skills application groups. Youth with identified risks in violent behaviors, sexual behavior, alcohol and other drugs (chemical abuse/dependency), and mental health are required to participate in groups specifically designed to address those risks. (See the specialized treatment strategies for program descriptions.) Youth attend additional supplemental therapeutic activities, recreational activities and leisure skills-building groups. Multi-disciplinary teams (MDTs) assess youth on their participation, progress, and completion of skills groups, supplemental groups, and daily practice of skills learned. Youth are expected to address relevant personal issues in the skills application groups and in individual meetings with the assigned case manager. Youth process behavioral issues and rule infractions with staff members, and sometimes with their peers under staff supervision, using “Thinking Reports” and “Check-Ins.” This process allows youth to become aware of the thinking, feeling, attitudes, values and beliefs that support unproductive behavior, and to intervene proactively when negative thinking, feeling and beliefs may derail preferred behavioral outcomes. The majority of practices, interventions and assessments are Evidenced-Based Practices (EBP) such as the PACT, “Thinking for a Change,” etc.

MDTs consist of a case manager, an assigned educator, and juvenile correctional officers who work with the youth on a regular basis. MDTs evaluate youth at least once every 90 days. Psychology staff is also present as needed in MDT meetings to provide input and assistance in the case planning process. Parents and Parole Officers are invited to participate in the multi-disciplinary team meeting. The MDT re-assesses a youth’s treatment progress, changing treatment objectives as needed to meet the individual youth’s needs and to target building specific skills. The individual case plan (ICP) provides youth, family and staff with an assessment of the youth’s progress in all areas of the general rehabilitation strategy and provides goals and action steps to build upon the skills learned. Every 90 days, following a re-assessment of the youth’s risk and protective factors, a quarterly summary report is provided to the youth’s parent/guardian. In this way, families are consistently engaged and connected to the youth’s progress and better prepared to help the youth adjust to the community upon reentry.

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SPECIALIZED TREATMENT PROGRAM DESCRIPTIONS

A large majority of youth have multiple specialized treatment needs identified during the assessment period. TJJD matches services and modalities to individual youth characteristics to ensure the best delivery of services. Some specialized treatments may be provided concurrently and others successively. Youth may have specialized needs addressed while in a high or medium restriction facility or on parole based on assessment results and treatment team recommendations. The types of specialized treatment follow.

SEXUAL BEHAVIOR TREATMENT PROGRAM (SBTP)

The agency offers a full complement of sexual behavior treatment services. The services provided to youth target their specific treatment needs. Services include assessment; supplemental psychosexual education classes; short-term treatment; pre- and post-treatment services; intensive residential treatment; and sex offender aftercare and outpatient treatment. Secure facilities provide all services except sex offender aftercare. Medium restriction facilities and parole offices provide only aftercare services or psychosexual educational classes. Programs are developed to be responsive to the unique issues of females, young offenders, or male adolescents with sexual behavior problems. Through a comprehensive assessment process, youth are matched with the appropriate treatment service. Treatment of youth with sexual behavior problems involves a multidisciplinary, collaborative approach utilizing techniques such as motivational interviewing, relapse prevention, impulse control, and self-regulation strategies. This model utilizes communication, cooperation, and coordination between TJJD personnel and outside invested partners to enhance community protection. The sexual behavior treatment program (SBTP) uses evidence-based case management and treatment strategies that seek to hold the youth accountable. Public safety, victim protection, and reparation for victims are paramount in the program design and inherent in the expectations, policies, procedures, and practices of the SBTP.

CAPITAL AND SERIOUS VIOLENT OFFENDER TREATMENT PROGRAM (CSVOTP)

The Capital and Serious Violent Offender Treatment Program (CSVOTP) treats youth who are committed to TJJD for crimes such as capital murder, murder and other offenses involving the use of a weapon or deadly force. CSVOTP comprises into two different programs, Capitol Offender Group (COG), and Violent Offender Group (VOP). Treatment staff includes case managers and mental health specialists who work within the high need CSVOTP at all of the facilities. 2016 was the first year that all of the facilities offered this treatment program. Both VOP and COG have a strong family therapy component at the end of treatment, use trauma resolution techniques and mindfulness training from dialectical behavior therapy. The difference in who is qualified for VOP versus COG is that VOP participants have not caused loss of life or substantial bodily injury, but have committed a violent offense. The program is designed to impact emotional, social, behavioral and cognitive developmental processes by integrating psychodynamic techniques, social learning and cognitive-behavioral therapy to create an intense therapeutic approach that aims to reduce individual risk factors and to enhance and build upon unique strengths of the youth. The program helps these young people connect feelings and thoughts associated with their violent behavior and to identify alternative ways to respond when faced with risky situations in the future. Capital Offender staff must have the necessary levels of education, experience in the delivery of treatment to juvenile offenders, and supervised training necessary to ensure the delivery of treatment services. The residential program promotes a coordination of treatment services and the continuity of care between capital offender therapists, caseworkers, and dorm staff.

AGGRESSION REPLACEMENT THERAPY (ART)

The Aggression Replacement Training® (ART) program is available to youth with a moderate need for treatment to address violent and aggressive behavior. Trained case managers and dorm supervisors lead 30 group sessions over a ten-week period. The program incorporates cognitive-behavioral concepts and moral reasoning strategies aimed at helping youth to make more conscious decisions about their emotional expressions and at developing pro-social values that help them function more safely in their relationships. Youth are expected to demonstrate a reduction in risk factors for anti-social thinking and aggressive behavior by the end of treatment to successfully complete the program.

ALCOHOL AND OTHER DRUG TREATMENT PROGRAMS (AOD)

The Alcohol and Other Drug Treatment Programs (AODTP) target a specific level of care based on each youth's treatment needs. The high intensity AODTP is designed for youth who have the most significant need. The moderate intensity AODTP is designed to address the needs of youth in a condensed programming schedule; many of these youth have co-occurring needs for other specialized treatment services.

For youth with identifiable substance use problems, TJJD provides several levels of alcohol and other drug treatment programs, including psycho-educational classes, short-term treatment, supportive residential programs, and a relapse prevention program. All programs are based on the philosophy that dependence on alcohol and other drugs is a primary, chronic disease that is progressive and influenced by genetic, environmental, and psychosocial factors. The approach to treatment is holistic and views chemical dependency as a family disease that affects everyone in contact with the addicted youth. Family and social supports are recognized as critical protective factors that will promote and sustain treatment gains during specialized treatment and community transition. Youth are encouraged to view chemical dependency as a lifelong process of recovery and to renew a daily commitment to their sobriety and interruption of self-destructive behaviors, including substance use and criminal conduct. All programs use evidence-based strategies and curricula and are provided by appropriately licensed clinicians.

MENTAL HEALTH TREATMENT PROGRAM (MHTP)

The Mental Health Treatment Program (MHTP) provides specialized mental health treatment, moderate intensity specialized treatments and general rehabilitative interventions at single program locations (McLennan Residential Treatment Center for boys and Ron Jackson for girls). MHTP provides enhanced psychiatric and psychological assistance, and smaller case manager-to-youth ratios (1:8). Programming within the MHTP may include trauma groups, Trauma-Focused Cognitive Behavioral Therapy, Seeking Safety curriculum, psychosexual groups, modified and moderate intensity sexual behavior treatment and alcohol and other drug treatment, Aggression Replacement Training® (ART), Cognitive Life Skills, boys' council, and girls' circle. All youth also receive appropriate educational services and behavioral health interventions by juvenile correctional officers. Having psychiatric and psychological staff focus on managing the symptoms associated with the youth's mental health issues allows the case managers to focus on risk reduction and protective enhancement strategies to reduce the risk of re-offending. This collaboration allows for holistic and individualized treatment for the youth in need of these services. Youth with unstable mental illnesses who are also dangerous to themselves or others receive care at the Crisis Stabilization Unit, a self-contained unit located within each of the MRTC and RJ facilities. Some youth require short-term therapy with medication management or medication monitoring only. This is considered a moderate or low need and can be provided at any facility. Ongoing assessments and reevaluation of the youth's mental health needs ensure youth receive the most appropriate services. While mental health treatment may not be "completed," the goal of the program is to stabilize any acute mental

health issues and teach youth techniques to manage their mental health issues as they reintegrate into the community.

FEMALE OFFENDER PROGRAM

All general and specialized treatment services have been modified, as necessary, to ensure gender responsiveness. The Youth Characteristics Table describes numerous ways that female offenders differ from male offenders, requiring that TJJD provide modifications to the treatment programs to account for gender differences. Differences include a higher chance that female youth have been victims of child abuse and sexual exploitation. Girls are more likely to have been placed outside their homes than boys. Female youth are more likely to have mental health symptoms, more likely to have used substances, and more likely to have committed a violent crime.

Female offenders have access to all needed specialized treatments, to include: Alcohol or Other Drug; Sexual Behavior Treatment; Capital and Serious Violent Offender Treatment; Trauma Focused-Cognitive Behavioral Therapy; Aggression Replacement Training®; Trauma Resolution groups; Pairing Achievement with Service (PAWS); and Girls Circle. Licensed clinicians or appropriately trained staff provide all programs. The Girls Circle, an evidence-based program, is a structured support group that focuses discussion on gender-specific topics designed to promote resiliency and self-esteem.

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METHODOLOGY FOR RECIDIVISM ANALYSIS: SCIENTIFIC DATA

To determine the effectiveness of agency programs, two kinds of measures are used in this report. The first and most traditional measure is recidivism. As used in this report, recidivism measures whether a youth has been rearrested, rearrested for a violent offense, or re-incarcerated after release from a residential facility. One limitation of this measure is that it reflects agency programs and culture as they existed some time ago. This report uses recidivism data for the first year youth are back in their communities, which means the data reflects agency programming received at least one year prior.

The second type of measure used in this report focuses on positive youth outcomes. This type of outcome--attainment of a GED or high school diploma, receipt of college credits, vocational certifications, and gains in reading or math achievement --reflects more than whether or not a person re-entered the juvenile or criminal justice system. It measures whether the youth has attained skills and tools that will contribute to a successful future as a productive member of society.

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SPECIALIZED TREATMENT PROGRAM OUTCOMES

Treatment Access

Among youth released from TJJD in recent years, specialized treatment needs, treatment program enrollment, and successful completion rates vary by gender and program. As shown in the summary table below, alcohol and other drug (AOD) treatment needs are most prevalent among TJJD youth, and the AOD program serves more youth than any other program. A total of 4423 new admissions since FY2009 - 3559 males and 294 females - were enrolled in high- or moderate-intensity AOD treatment prior to release by FY2016. The need for high- or moderate-intensity sexual behavior treatment (SBTP) is least prevalent among TJJD youth and is particularly rare among females. Of the 654 youth with a need for SBTP, 647 (99%) were enrolled in high- or moderate-intensity treatment prior to release.

Overall treatment completion rates are at 87% or higher for each treatment program except mental health, which has a successful completion rate of 61.5%. For males and females, successful completion rates are highest for capital serious violent offender treatment (CSVOTP), with 94.3% of males and 90.6% of females successfully completing. Successful completion rates are lowest for mental health treatment, with 72.3% of females and 59.3% of males successfully completing. The agency's hypothesis that explains this disparity in completion rates is that mental health disorders tend to have a chronic and relapsing course in the symptoms presented by the client, so there is no expectation of a "cure," but the treatment programs aim to teach management of the symptoms.

Tables in the appendices describe increased treatment enrollment and completion rates in the last two years for the two residential programs that serve youth with violent offenses. The number of youth enrolled in this residential service more than doubled, and those enrolled in moderate services increased from 65% to 79%. From the year 2011 through 2015, completion rates for these youth had not been above 45%, but in the last two years, 55% and 65% of youth respectively engaged in the programs completed successfully. Appendix A for AOD treatment indicates that 77% of female youth enrolled in high intensity AOD completed successfully, and more than 88% of males enrolled in high intensity AOD completed successfully.

The youth represented in the SBTP program tables in the Appendices were enrolled in residential level treatment at approximately the same rate as in the last five years. However, the agency noted that the number of youth who needed moderate level treatment was only half of what it was over the last three years.

The trends in needs and enrollment in mental health services for female youth have shifted notably. Fewer female youth have a need for residential services, but the need for moderate level services has tripled in the last five years. For male youth, the need for residential level services has decreased by one third, while moderate need for services has more than doubled.

NEW ADMISSION SINCE FY2009, RELEASED BY FY2016
TABLE A.2

	MALES			FEMALES			ALL		
Spec Treatment Program	High/Mod Need #	High/Mod Enrollment #	Completion Rate	High/Mod Need #	High/Mod Enrollment #	Completion Rate	High/Mod Need #	High/Mod Enrollment #	Completion Rate
Alcohol & Other Drug	4098	3559	92.8%	325	294	76.2%	4423	3853	91.5%
Capital Serious Violent Offender ¹	2187	2036	94.3%	191	180	90.6%	2378	2216	94.0%
Mental Health ²	1057	771	59.3%	229	159	72.3%	1286	930	61.5%
Sexual Behavior	645	638	87.0%	9	9	88.9%	654	647	87.0%

¹This category also includes the high-intensity Violent Offender Program, and moderate-intensity Aggression Replacement Training (ART).

²Completion of mental health treatment includes symptom stabilization for FY16 releases.

Table A.2 above shows the number of youth with high or moderate needs identified, the number enrolled in high- or moderate-intensity treatment programs, and the percentage of enrolled youth successfully completing. For detailed information on treatment needs, enrollment, and completion by treatment intensity level and release year, please see Appendix A – Alcohol & Other Drug Treatment Program, Appendix B – Capital Serious Violent Offender Treatment Program, Appendix C – Mental Health Treatment Program, and Appendix D – Sexual Behavior Treatment Program.

Recidivism

One-year recidivism rates for youth released from TJJD in recent years vary by specialized treatment program, gender, and recidivism measure. As shown in the summary table below, one-year re-arrest rates and violent re-arrest rates are substantially higher for males than females across treatment programs, though males and females have similar rates of one-year re-incarceration. (Reasons for re-incarceration include technical violations of parole.)

For males and females, one-year re-arrest rates are highest among youth who participated in high- or moderate-intensity alcohol and other drug (AOD) treatment, with 53.5% of males and 28.2% of females rearrested within one year. Re-arrest rates are lowest among youth who participated in high- or moderate-intensity sexual behavior treatment (SBTP) – 24.9% and 7.1% for males and females, respectively.

Rates of re-arrest for a violent offense are much lower than overall re-arrest rates, and are particularly low for female youth released from TJJD. Violent re-arrest rates are highest for youth who participate in violent offender treatment (CSVOTP) and lowest for youth who participate in SBTP. Among youth participating in high- or moderate-intensity CSVOTP, 12.2% were rearrested for a violent offense within one year of release. Among youth participating in high- or moderate-intensity SBTP, 4.6% were rearrested for a violent offense within one year.

Females participating in high- or moderate-intensity mental health treatment have the highest one-year re-incarceration rate (18.8%), followed by females participating in high- or moderate-intensity AOD treatment (18.0%). Re-incarceration rates are lowest for youth participating in SBTP, with 7.2% of youth re-incarcerated within one year of release from TJJD.

The table below shows the number of TJJD releases who participated in high- or moderate-intensity treatment programs, and the percentage of those releases recidivating within one year. For detailed recidivism information by release year and treatment intensity level, please see Appendix E – Alcohol & Other Drug Treatment Program Recidivism, Appendix F – Capital Serious Violent Offender Treatment Program Recidivism, Appendix G – Mental Health Treatment Program Recidivism, and Appendix H – Sexual Behavior Treatment Program Recidivism.

**ONE-YEAR RECIDIVISM RATES BY SPECIALIZED TREATMENT PROGRAM
NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
TABLE B.1**

Specialized Treatment Program	# Released	% Rearrested	% Rearrested Violent Offense	% Reincarcerated
Males				
Alcohol & Other Drug	3649	53.5	11.9	17.2
Capital Serious Violent Offender ¹	2392	52.1	13.1	17.5
Mental Health	1690	48.0	11.1	16.2
Sexual Behavior	747	24.9	4.7	7.2
Females				
Alcohol & Other Drug	316	28.2	1.9	18.0
Capital Serious Violent Offender ¹	238	22.3	3.8	17.2
Mental Health	245	23.7	2.9	18.8
Sexual Behavior	14	7.1	.	7.1
Total				
Alcohol & Other Drug	3965	51.5	11.1	17.3
Capital Serious Violent Offender ¹	2630	49.4	12.2	17.5
Mental Health	1935	44.9	10.1	16.5
Sexual Behavior	761	24.6	4.6	7.2

¹ This category also includes the high-intensity Violent Offender Program, and moderate-intensity Aggression Replacement Training (ART).

Note: Youth may be counted more than once if enrolled in more than one treatment program.

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EDUCATION

RELATED PROGRAMS AND SERVICES

TJJJD Education focuses on an integrated approach to education, treatment and intervention. When reviewing the characteristics of youth committed, TJJJD Education incorporates many different approaches to address multiple and interrelated needs. Approaches include a focused education, transition and re-entry services, and family involvement and support. Although this report focuses primarily on rehabilitation and treatment services, it is important to emphasize that youth treatment outcomes are influenced by factors greater than any one program alone. For example, a youth may perform well in the sexual behavior treatment program, but his or her successful outcomes will depend not only on what the youth learned in a specialized treatment program, but also on variables such as his or her ability to obtain a high school diploma or GED and find employment upon release. A shared goal for all TJJJD divisions is reintegration of the youth into the community through the support provided during their stay at TJJJD facilities. Information on related programs and services for the youth are provided below.

EDUCATIONAL PROGRAM

During FY2017, the TJJJD Education division focused on numerous interventions that align with core principles for reducing recidivism and improving youth outcomes. The Education division has sustained its use of Positive Behavioral Interventions and Supports (PBIS), a proven framework that uses behavioral data for individual and targeted interventions, as well as system-wide improvements. TJJJD Education uses multi-tiered intervention systems not only in the PBIS system, but also in the Response to Intervention (RtI) program that monitors academic progress for struggling students. This offers more intensive, individualized support for youth who fail to respond to standard interventions. The concept of increasingly intensive and individualized supports parallels with the important treatment concept of the Risk-Needs-Responsivity Principle. In both approaches, the intensity of supports provided matches the risks and needs presented by the individual youth.

As TJJJD Education moves to a multi-tiered system of support, it is imperative to monitor fidelity of PBIS to ensure system-wide implementation and improved youth outcomes. To ensure these programs remain stable and supported, new hires are trained as part of the on-boarding process.

To further develop the integration of multiple systems, the Education division uses an in-house database to capture “minor” behavioral incident data in a manner that local Professional Learning Communities (PLCs) comprised of teachers and administrators are able to use the data to design effective interventions. In addition, through the acquisition and analysis of these data, TJJJD Education is able to support additional interventions for youth who fail to respond to standard interventions.

During the current school year, Education incorporated Aggression Replacement Training® (ART), a secondary intervention for youth with behavioral problems in schools. This requires coordination between treatment and school personnel to address student needs while supporting an integrated, holistic view of each youth. Classroom teachers are also learning ART strategies to ensure a wraparound approach when addressing aggression issues.

In the upcoming school year, 22 individuals from the Education and State Programs divisions will train with the Restorative Discipline and Restorative Dialogue Division of the University of Texas-Austin. The purpose is to:

- create a culture shift to promote youth understanding of a restorative model rather than a punitive one;
- set the youth up for success no matter what their past;
- help youth understand how to build respect, responsibility, relationship building and relationship repairing through mediation and agreement rather than punishment;
- keep youth in the classroom and create a safe environment where youth can learn;
- reduce the amount of instructional time lost to managing youth behavior challenges;
- identify behavior and disciplinary problems in a cooperative and constructive way.

It is within our agency's mission to uphold fairness and justice through restorative approaches that will ultimately contribute to social and emotional learning.

FUTURE FOCUS

TJJJD completed a full year of offering dual credit in three welding classes at three different schools with 23 students successfully earning dual credit. Additionally, opportunities to earn OSHA certifications were expanded to an additional school along with online forklift certification training. Efforts will continue to explore expanding dual credit opportunities as well as supplemental certifications.

TJJJD EDUCATIONAL PROGRAM OUTCOMES

Positive Youth Development

Education measures below reflect performance for FY2017. Included are four agency performance measures with 5-6 year trends: GED and diploma rate; percent of students reading at grade level at release; industrial certification measures; average school attendance; as well as a measure for post-secondary success in college courses. Data reflect the performance of all students enrolled during the period.

During FY17, 43.11% of youth age 16 or above earned a high school diploma or certificate of high school equivalency within 90 days after their release from TJJJD-operated schools. Achievement of educational objectives is associated with improved job and educational prospects after release.

GED and Diploma Rate FY 2012-2017						
FY	2012	2013	2014	2015	2016	2017
Diploma or GED Rate	41.43%	41.37%	47.51%	40.14%	44.43%	43.11%

Reading at Grade Level at Release

During FY17, 20.17% of youth were reading at grade level at the time of their release.

The TJJD Education Reading Program operates effectively following agency policies and procedures (GAP.380.9155 and EDU.13.51) and criteria mandated in Texas Education Code Chapter 30.106. TJJD Education tracks reading performance data, administers the TABE test every six months to every student, gives the TOWRE-2 (a test of word reading efficiency) to all students at entry and again at least 15 days and not more than 30 days before a student is released from TJJD.

Reading Rates FY 2012-2017						
FY	2012	2013	2014	2015	2016	2017
Percent of Students Reading at Grade Level at Release	16.27%	17.04%	17.21%	17.14%	20.87%	20.17%

Industrial Certifications

During FY17, 1725 youth enrolled during the school year in career technology courses earned 270 industrial certifications. This compares to 362 industrial certifications earned by 1273 youth enrolled during the 2016 school year in career technology courses. Career Technology Education (CTE) Teacher vacancies, turnover and FMLA limited the number of certifications awarded.

Number of Industrial Certificates Issued by FY	
2017	270
2016	362
2015	263
2014	303
2013	356

Industrial Certification Rate

The agency's performance measure for industrial certification rate defines it as the percent of students enrolled in 9th grade or above who earned an industry certificate. Using this definition, the certification rate during FY17 was 33.83%, a slight decrease from 34.95% during FY16. This decrease resulted from long-term vacancies in a few CTE positions. If all CTE teachers' vacancies were filled, CTE instructional time for students who have not yet earned their diploma or GED would increase, as would the industrial certification rate.

Industrial Certification Rate (Students Enrolled who earned a certificate)	
2016-2017	33.83%
2015-2016	34.95%
2014-2015	28.10%
2013-2014	28.08%
2012-2013	33.64%

Average Daily Attendance (ADA) Rate

During the 2016-17 school year, 98.3% of the enrolled youth attended school daily as measured by protocols approved by the Texas Education Agency for student attendance accounting. The attendance rate has been highly consistent over time from the 2012-13 school year with a 98.6% ADA.

Average Daily Attendance Rate	
2016-2017	98.3%
2015-2016	97.2%
2014-2015	98.3%
2013-2014	98.7%
2012-2013	98.6%

College Course Enrollments and Course Completions

During the 2016-17 school years, 136 students completed 295 college and dual high school and college credits. This compared to the 2012- 2013-school year when 153 students completed 175 college courses for dual high school credit and college credit.

College Course Enrollments and Course Completions		
School Year	Students	# of courses
2016-2017	136	295
2015-2016	131	199
2014-2015	118	149
2013-2014	194	203
2012-2013	153	175

CAPSTONE PROJECT STATUS UPDATE

At the inception of the Capstone program in 2015, the hope was that through individualization of the TJJD treatment programming, youth who would not otherwise find success in the overall rehabilitation program would have new opportunities to progress.

TJJD saw significant and meaningful results from this effort. While some youth lacked time to complete the program, transferred to adult prison, or failed to progress rapidly in their treatment stages, the majority of youth experienced rapid, even unanticipated improvement in several areas of functioning. The program has expanded and currently twenty-nine youth are in the Capstone program around the state. All youth have participated with the Capstone staff, learning and training on everyday life skills.

For Giddings, Capstone participants showed a 48% percent decrease in Security referrals after completion of the program. Of 10 Giddings participants released in FY2017, six maintained employment after release; two aged out with current outcomes unavailable; one is in jail and one is pending deportation. Of 11 Capstone participants released from Mart, ten generally practiced independent living skills, improved their behavior, worked on campus through appropriate training, in addition to successfully earning certifications. The pool of 11 Capstone participants at Mart earned the following online certifications.

Online Certification	Number Awarded
Chemical Cleaning Products	8
Hazardous Communication	8
Personal Protective Equipment	7
Food Handler	5
Warehouse Facility Proficiency	3
First Aid and CPR	2
Electric Motor Rider Trucks (Forklifts)	2
OSHA General Industry Safety & Health	1

At Ron Jackson, 12 girls who had previously demonstrated significant behavioral problems reduced their Security referrals and incidents requiring Level II hearings to zero. Accordingly, school environments saw fewer disruptive incidents and quieter hallways.

The Capstone project met and exceeded its goals, producing an immediate benefit to participating youth and the agency. Individual youth demonstrated quickly that for them, engaging in activities in which they saw purpose and reward was highly motivating. Youth showed rapid progress through Stages, nearly universally. Additionally, all youth demonstrated progress in addressing their risk and protective factors. They achieved the ability to listen to directions, solve problems, cooperate with others, communicate appropriately, and take responsibility for their own learning.

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RE-ENTRY AND RE-INTEGRATION REPORT

Re-Entry and Re-Integration

In 2009, the 81st Texas legislature required the agency to develop a comprehensive reentry and reintegration plan for each child committed to the agency (Texas Human Resource Code, Section 245.0535). The plan for each child is required to contain elements applicable to them including, but not limited to: housing assistance, a step-down program, family counseling, academic and vocational mentoring, trauma counseling, and other appropriate specialized services. The intent of the legislation was to “ensure that each child receives an extensive continuity of services from the time the child is committed to the department to the time of the child’s final discharge from the department.” The agency, under this legislation, was also required to develop a comprehensive reentry and reintegration plan which provided for an assessment of each child’s needs in order to develop an individualized plan for that child, programs that address the assessed need of each child, and a comprehensive network of transition programs and providers in the communities who can adequately serve youth.

The comprehensive plan, describing the agency’s path to achieving the statutory requirements, known as “Cultivating Success: The Reentry and Reintegration of TYC youth” was finalized in June 2010. Since that time, the agency has published 2 additional reports as required, by December 31 of each even-numbered year, reporting on compliance with the statute and resulting recidivism outcomes. In 2016, the required information was captured within the context of the agency’s overall treatment effectiveness report since efforts to improve the re-entry process and outcomes are intertwined with other agency initiatives and treatment programs. In 2017, we repeat that process.

As part of its involvement in the Youth in Custody Practice Model (YICPM), in March 2016, TJJD formed a Re-Entry workgroup to analyze agency gaps in current practice, as compared to best practices. The agency also reorganized the re-entry and parole functions, creating the Division of Youth Placement, Re-Entry and Program Development on September 1, 2016. Reorganization conveyed a strong message about the importance of enhanced focus on integration of a re-entry system within the broader context of the agency’s rehabilitation program. The agency adopted the following Re-Entry Vision Statement, which underscores the intent of the human resources code and captures the best practices outlined in the YICPM:

We provide a proactive, strengths-based, and holistic re-entry experience created with, and for, youth and their families, which begins at the time of commitment and continues beyond discharge. The approach is based on assessed level of risk and targeted interventions, with the final outcome being self-efficacy and self-reliance. Successful re-entry will encompass family advocacy, empowerment, academic achievement, vocational & employability skill development, and a connection to community resources and supportive relationships.

Best practice for re-entry means that the process begins when the youth arrives at the intake unit and continues seamlessly, with strong collaboration between case manager, parole officer, the youth and the family, while the youth is in residential programs. This process has been fully described in prior Reentry and Reintegration reports published by the agency. A strong re-entry system must tie the youth to education, employment, stable housing, a strong and prosocial support system, aftercare services to address on-going treatment needs and other developmental needs and, it needs to do so in a coordinated and well integrated manner. Although, these services have been in place within TJJD, the full integration is an area of our work that is absolutely critical to enhancing the opportunity for successful outcomes, and is the focus of the YICPM workgroup.

The workgroup identified the following gaps which will be addressed with policy and procedure changes, training initiatives, quality assurance measures and performance outcome goals in order to ensure sustainability:

Gap 1: Youth and families need to be taught to navigate systems (medical, behavioral health, educational, workforce, human service agencies, community resources, housing, transportation, recreational/leisure) and to appropriately advocate for themselves within these systems. This moves the youth toward permanency after discharge.

Gap 2: Youth need additional interpersonal life skills (“soft skills”) training, with practice embedded throughout their structured days in residential programs. Furthermore, youth should be provided reality-based experiences where they can develop and refine the skills that will be applicable to their individual community and life circumstances so that they are truly ready for release.

Gap 3: The agency needs to develop and utilize innovative internal marketing tools that underscore re-entry as an integrated process that begins at intake, continues through discharge, and shows successful outcomes for youth and families.

Gap 4: More youth need mentors who begin their supportive relationships with youth in residential placements and continue that relationship once the youth is in the community. This will enhance connectedness to the community beyond the biological family unit.

Gap 5: Although a network of providers and services exists, continuity and oversight of these services for quality outcomes needs improvement. Field staff, facility staff and contracted community providers need to work as a consistent team with the youth and family using an integrated and comprehensive case plan to drive the process.

Gap 6: TJJD needs to improve the model of parole supervision to more clearly reflect best practice, such as:

- smaller residential caseloads to enhance quality contact with the youth in placement and his/her support system in the community;
- basing initial supervision level on risk and protective factors instead of on the committing offense;
- supervision strategies that emphasize changing attitude and behavior rather than merely following conditions of parole; and
- ensuring parole officers have opportunities for advanced and continuing education/training in communication skills, such as Motivational Interviewing.

In addition to doing the work to identify and gain momentum addressing these gaps, the agency has continued several initiatives described in prior reentry and reintegration reports and have made additional gains as follows:

Parole youth survey

In an effort to monitor improvement of reentry services and learn about the experiences of youth who are unsuccessful on parole, the agency has been conducting surveys of youth who have had their parole revoked and have been returned to TJJD residential facilities. Surveys provided the following qualitative data (survey dates January 2016 to November 2017):

- 64% were assigned to a home placement with their parents or guardian when revoked;
- 64% had a State Identification Card when they returned to their prospective home placement;
- 76% reported that transportation was not a problem (as family members were able to provide transportation for the youth to activities, school, aftercare treatment, work, etc.);
- 66% of the youth engaged in aftercare once on parole status;
- 66% stated they had the support they needed from their Parole Officer.

Written responses reflected that some youth took responsibility for their actions and stated that the parole division did provide multiple opportunities to be successful, but cited their own choices and mistakes as reasons for their failed attempt at parole. Youth did note that despite meeting with their parole officers on a weekly basis, they wanted more counseling sessions similar to those experienced with the case managers within the facility. Additionally youth, generally expressed a need for more resources once back in the community. The survey continues to provide valuable information from revoked youth and supports the direction of current initiatives (some listed below). In the future, the survey will expand to capture the experience of other youth.

Soft Skills Development

TJJD understands the importance of soft skills training for all youth moving toward adulthood. As reflected in the statements of revoked youth, this is an area of critical importance for youth in our care who often lack basic life skills needed to successfully navigate the community around them. Currently, several curricula are available across the agency for use by case managers and youth, but the development of a statewide agency soft skills curriculum is underway. This package will include pre- and post-tests, group lessons and a guide for staff use. Once finalized, it will be available and accessible to all TJJD youth in residential placement and on parole. This curriculum will be offered in a group setting to youth in TJJD residential facilities with the focus of preparing these youth for adulthood. In addition to group lessons, an additional focus will be made on teaching these youth through experiential learning whereby they go into the community and have this training provided to them by community members in a variety of settings. Eight broad areas of focus are included in the curriculum including such topics as how to find, secure, and maintain employment; how to develop and maintain a healthy lifestyle; skills development to improve TJJD youth's interpersonal relationships and build self-esteem; financial management; and how to find, secure, and maintain long term housing and transportation as an adult.

Youth ID Cards

TJJD continued to collaborate with the Texas Department of Public Safety and provide the opportunity for more TJJD youth to reenter society with a sense of normalcy by having their own Texas Identification Card. The process to obtain identification cards begins at facilities to ensure that once released to the community, ID cards are already available to them. Some youth are not always able to return to their home counties, so an identification card is a way of establishing identity for themselves that is necessary for placement in housing (i.e. apartments, dorms etc.), enrollment in college or vocational schools, and securing employment. When applying for employment opportunities and/or educational programs, the identification card is essential. Youth are placed in a variety of locations across the State of Texas that align them with services suited for their needs and that lead to better chances of success. The identification card is one tool for success that TJJD attempts to make available for them prior to transition. TJJD is working to ensure that more youth have an identification card prior to release. In FY 2017, the agency issued 217 cards.

Voluntary Laser Tattoo Removal

Funding through the GitRedy grant ending in December 2014 afforded TJJD the opportunity to purchase a laser tattoo removal machine. The TJJD Medical Director oversees the tattoo removal clinic established at Giddings State School in 2015. TJJD-operated tattoo removal services comply with all applicable requirements in 25 TAC §289.301. Trained technicians provide tattoo removal services to youth on a voluntary basis. Priority for the removal goes to tattoos visible on the hands, arms, face, or neck; and/or reflect gang affiliation. Since the inception of services in January 2016, 149 youth have received removal services with an additional 16 youth on the list to begin services. Youth from 4 institutions (Giddings, Gainesville, Mart, and Ron Jackson) have participated as well as youth from 2 half-way houses (Brownwood and Ayres). The youth that receive treatment average 4 to 6 tattoos for removal with the tattoos ranging in size from a small dot to a half-sleeve on the arm. To augment on site tattoo removal availability, TJJD continues to partner with community programs, or local tattoo artists, that provide removal services at little to no cost to youth upon release. Parole officers have also helped youth to use cosmetic means to cover facial tattoos. Removal of visible tattoos enhances a youth's ability to secure employment and be successful in his or her reentry efforts.

Academic and vocational development

To enhance reentry preparedness of TJJD students, the Education division has partnered with community colleges to pilot two separate initiatives that assist youth with transitioning to post-secondary education by offering dual credit opportunities in vocational classes and acquiring enhancement certifications to assist with acquiring employment once released. Last school year through partnership with Blinn College, vocational students at Giddings State School had opportunity to earn CPR/First Aid and Occupational Safety and Health Administration (OSHA) 10 hour certifications. These certifications serve as supplements to the industry-based occupational certifications students had opportunity to earn in welding, building trades and automotive classes. We are working to continue those efforts at Giddings State School and explore other resources to expand the offerings to other TJJD schools. Additionally, TJJD Education has partnered with Blinn and Navarro Colleges to implement dual credit in our welding courses at Giddings State School, Gainesville State School and McLennan County State Juvenile Correctional Facility.

Finally, TJJD employs three Workforce Development Reentry Specialists in district offices in different major metropolitan areas. Their focus is to provide facilitation and support to youth regarding preparation and obtainment of employment and enrollment in vocational training or continued higher education. These positions assist youth, their families, Parole Officers, Family Liaisons and Halfway House staff to address reentry issues and positively enhance the transition experience.

Support for Re-entry and alternative housing efforts

TJJD recognizes that addressing the youth's fundamental needs for housing and other basic needs is critical for positive outcomes beyond parole services. Older youth at times cannot return home due to many circumstances and are at high risk for homelessness. Historically, TJJD has addressed this need with independent living preparation and a narrowly focused independent living subsidy program that over time has encountered a significant decrease in funding.

Through a reprioritization of funds, TJJD was able to dedicate \$80,000 in FY18 to broaden the scope of the funding through policy change that promotes successful community reentry rather than complete self-sufficiency (i.e. independent living). This means there will be more youth who can be assisted with primary needs such as food, housing goods, public transportation, employment related clothing, college expenses, technical training, tools and structured leisure time activity. To date \$7,495.53 has been expended or encumbered for food subsidies, transportation, work related clothes, education and housing.

TJJD continues plans to further re-grow the “Financial Support for Reentry and Subsidy” program by requesting additional funds to address hard to place youth and prepare them for sustainability after their stay in TJJD.

In addition, TJJD recognizes the need to expand the agency’s resources concerning long-term living arrangements for older youth unable or unwilling to return to their home environment. Agency staff continue to meet and collaborate with community partners to broaden the agency’s existing housing resources by offering a variety of housing alternatives to meet the individual needs of youth in our care. Networking with existing community partners offering transitional living programs, supervised independent living apartments, and sober living housing options (such as Oxford House) has improved the breadth of options available to the youth in our care increasing the likelihood of their success upon community return. Youth who use these living arrangements can also receive short-term financial support. In addition, TJJD continues to partner with DFPS to offer the Preparation for Adult Living (PAL) independent study guide to DFPS youth in TJJD custody (referred to as crossover youth). By having these crossover youth complete the PAL curriculum, they are eligible for additional subsidies for housing and related needs as well as eligibility for tuition waivers for college and trade schools. To make completion of the PAL curriculum more accessible for both youth in TJJD placement and youth on parole, the documents are now in a Sharepoint environment accessible to all TJJD staff.

Also, effort is underway to increase the use of agency trust funds for college expenses which can serve youth defined as orphans even after they have completed their stay in the agency. Distribution of these trust funds will now be the responsibility of the agency’s reentry system. As of 10/30/17, \$24,511.75 has been expended in FY18 to help defined orphans attend college.

Finally, to address some youths’ need for long-term sustainable housing, TJJD is exploring a long-term, multi-agency initiative with community partnerships to develop tiny house options. The goal of this initiative would be to provide affordable housing to homeless youth between the ages of eighteen and twenty-four. In addition to the variety of methods noted above to assist youth with community reentry, TJJD has designated staff whose function it is to identify youth with housing challenges early in the reentry planning process so that assistance can be provided to facility and parole staff with locating and tapping community based living programs already in existence.

Strengthening the role of families

TJJD recognizes that a youth’s relationship with his family is a critical component to his successful rehabilitation and re-entry. As a result of the YICPM initiative, the agency has made significant achievements toward fully engaging families in their child’s treatment and re-entry planning. We envision building a rich support system for youth, where our practices reflect our commitment to a culture that promotes the authentic and proactive inclusion of families and other positive individuals in the youths’ lives. We demonstrate our commitment to honoring, trusting, valuing, empowering and strengthening families through partnering and increasing access, engagement and involvement in every aspect of their child’s programming, including decision-making.

The agency expanded the definition of “family” to include non-traditional family members and other individuals, often referred to as “fictive kin,” who have a positive influence on the youth. These individuals can now be assessed on a case-by-case basis and granted visitation approval. We are seeking additional ways to engage these supportive individuals in the youth’s treatment and re-entry planning.

The value of family engagement is being promoted among our employees through a new training curriculum entitled “Bringing it Home: Engaging Families in the Juvenile Justice System.” This training is

intended to change the mindset of correctional personnel by instilling empathy for the family's experience of having a child incarcerated. The curriculum emphasizes an assets-based approach to working with families and endorses parents as the subject-matter-expert of their own child. The agency strives to create cooperative partnerships with the families of TJJD youth.

Communication with a youth's family is being encouraged and facilitated using a variety of means. Through a statewide initiative that started with the purchase of 18 i-Pads, virtual family visitation is being facilitated between incarcerated youth and families who are unable to travel to remote facilities for face-to-face visits. This initiative fosters healthy family relationships and open communication prior to a youth's return home. During fiscal year 2017, agency staff facilitated 648 virtual visits between family members and youth and this number continues to increase rapidly.

Personal visits continue to be encouraged and our facilities host quarterly Family Days in which large numbers of family members participate in special activities and information sessions. The agency recently renovated our visitation spaces, making them more family-friendly by adding games and other activities and softening the institutional environment. Family engagement greatly increases the likelihood for successful re-entry into the community and the family home.

Statewide emphasis has also been placed on increasing the participation of youths' parents in the multi-disciplinary staffing meetings, during which re-entry planning occurs. We are using every means possible to engage parents, including the use of technology for virtual participation. Through these initiatives and many others, TJJD is engaging the youth's family every step of the way during their rehabilitation and re-entry.

Strengthening the opportunity for home placements that support successful reentry

Understanding that one of the strongest indicators of successful reentry is the number of committed adults in a youth's life, TJJD partnered with Texas CASA and received training in Collaborative Family Engagement and identifying fictive kin. In addition, the definition of family was broadened to support the finding of additional persons who may play a positive role in the youth's life. Also, TJJD has adopted use of the Foster Club's Permanency PACT to identify long term supportive adult connections which will provide assistance for basic needs and supports for successful reentry and beyond youths' stay in the agency.

Home evaluation form revisions

In August 2016, staff within the parole division reevaluated the current home evaluation form. Parole officers complete an evaluation during the initial 30-60 days of a youth's admission to TJJD and determines whether a parent/guardian's home is suitable for the youth's eventual return based on minimal criteria. More importantly, it provides information to the youth's residential treatment staff about the youth's home living environment. Agency staff determined that effectiveness of case planning could be improved by collecting more information from families/guardians during this initial contact with the family. As a result, TJJD enhanced the collection of strengths-based information, and extended the scope of inquiry around current family needs, support systems, and the needs of permanency planning for youth and family.

Treatment Family Reunification and aftercare initiatives

TJJD has recently solicited and secured a network of providers to expand treatment, reentry and aftercare services based on family-focused programming that prioritizes involvement of families much earlier in a youth's stay in residential placement. TJJD has recognized a need for increased oversight of contracted programming to ensure fidelity of treatment models proposed by contractors. To strengthen oversight of

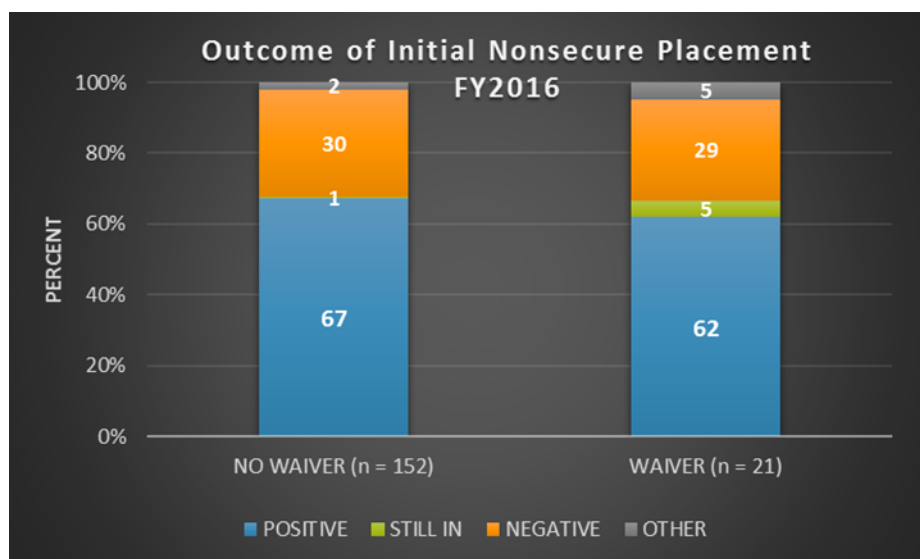
contracted services, the contract specialist is sharing monthly monitoring findings with the Monitoring and Inspections division that will provide additional monitoring based on a risk and priority tool under development.

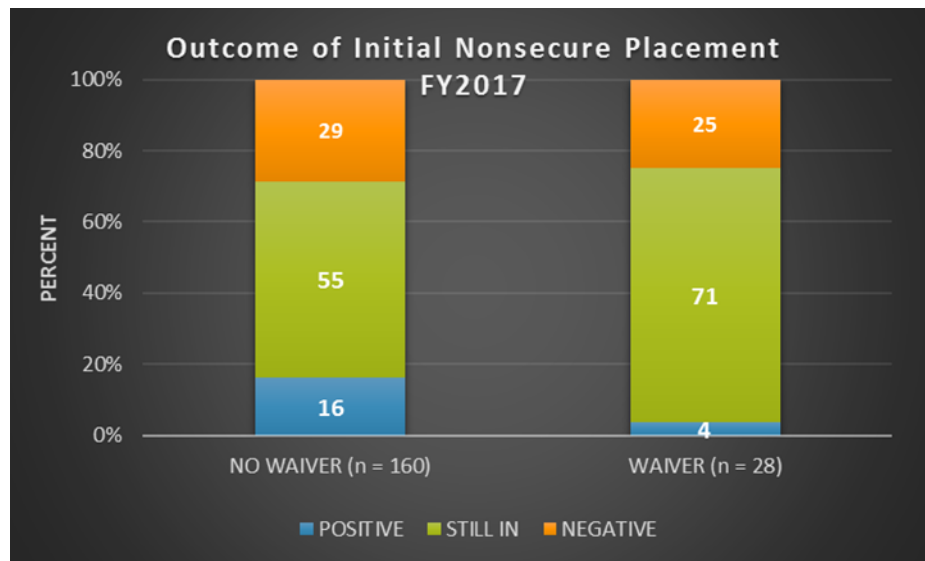
To better prepare families for a youth's return home, the agency created a new full time position known as the Family Reentry Enrichment Specialist. This position is responsible for facilitating a proactive, strengths-based, and holistic reentry experience created with, and for, youth and their families, which begins at the time of commitment and continues beyond discharge. The position resides to the Southern parole region with the aspiration of replicating to all major parole regions should the outcomes perform as expected.

To broaden the opportunity for youth to receive aftercare services and to increase fiscal responsibility, the agency amended aftercare contracts to place priority on the use of Medicaid and/ or private insurance for services provided to TJJD youth and their families. To that end, a Sharepoint tool is now available to assist staff in finding Medicaid providers located near where the youth will be returning. An added benefit to this approach is that youth can continue to see their Medicaid provider after discharge from the agency.

Halfway House initiatives

Halfway house (HWH) programs are a vital part of the reentry process. The agency has placed additional focus in the last year on the most effective use of these programs and their collaboration with the parole division. Current TJJD policy allows for select youth to transition directly into TJJD-operated halfway houses and contracted non-secure facilities, referred to collectively as step-down programs, following completion of intake assessments and TJJD orientation. Typically, 20% of youth transition into these facilities at intake. This year, the agency piloted a process by which additional youth received the opportunity to go directly into non-secure programs. In this way, youth with lower risks to re-offend, even those who may have an adjudication for a violent offense in their history, are given an opportunity to stay at the "shallow end" of the TJJD system, consistent with best practice. Initial results for the pilot process are promising. FY 16 comparisons of youth waived in to medium care sites had similar positive and negative outcomes as youth eligible for direct medium care placement (i.e. without waiver).





Youth placed in secure facilities after intake are also assigned a step down program for transition to the community prior to home. HWH staff contact these youth early in their stay at the secure location to encourage them to complete treatment and earn their stages to qualify for transition to the HWH as early as possible. Early transition allows youth the opportunity to field test the skills they have acquired in a structured and supervised location. Opportunities for youth to receive specialized treatment have increased in the HWHs. During the past legislative session, legislators approved three more Mental Health positions to complement three existing Mental Health Specialists in the HWHs. These positions provide AOD Moderate and aftercare, Anger Management, and Mental Health counseling as needed. Additionally, the Workforce Reentry Specialists located in the district offices have increased their efforts to assist youth in the HWHs with training and employment opportunities.

Given changes in the facility assignment process and other initiatives, the average daily population for HWHs increased from 134.53 in FY15 to 143.12 in FY16 to 144.33 in FY17. In addition, the number of youth served at HWHs increased from 561 in FY15 to 614 in FY16 to 686 in FY17. Based on commitment trends, this increase is projected to continue.

Parole Operations Enhancements

Parole operations has continued to implement the Youth In Custody Practice Model in basic parole services and supervision strategies, and to better communicate the role of parole officers in the re-entry process. Enhancements to parole operations include the following.

- Parole officers received additional Motivational Interviewing training to be better equipped to create/identify opportunities for youth to demonstrate intrinsic motivation for attitude/behavior changes rather than monitoring simple compliance.
- The collaborative relationship with the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) was strengthened which resulted in more accurate referrals so youth can have their mental health needs addressed in the community and the related agency standard was enhanced to support this effort.

- Revision of the discharge policy to support high severity youth who show positive development by allowing them to earn discharge before their 19th birthday. Revision also clarified that special discharges beyond those listed in the rule can be approved by a designee of the executive director.
- Revision of the electronic monitoring standard to encourage youth to complete their programming successfully before release to parole by the Release Review Panel. The standard contains flexibility so that other youth who pose additional risk can still be released with a monitor with approval of the Senior Director.
- To exploit emerging technology and to increase the opportunity for officers to communicate with youth and families, the contact standard was amended to allow use of electronic devices that communicate using audio and visual technology, i.e., virtual contacts.

TJJD updated procedures for home placement assessments to include review of the Juvenile Case Management System, the Individual Assessment and Treatment Summary, and Chronological Records to better equip the officer to converse with the family about the treatment and reentry needs of the youth. Updated procedures also:

- Require that the parole officer team with the case manager to communicate importance of the home assessment to the family with the goal of increasing the family's responses to attempts to contact for a home assessment.
- Require that the parole officer complete the family orientation so that the family will have an early understanding of their role in the youth's successful reentry.
- Specify that when a youth's rehabilitative needs prevent a youth's home from being approved, the parole supervisor will contact the manager of reentry system and parole operations for assistance in seeking an alternative parole placement that can address the youth's rehabilitative needs.
- Develop a clear distinction between youth who need treatment and youth who would be supported better in a recovery community. Provisions provide for partnership with Health and Human Services to locate and initiate the use of recovery coaches and communities to provide youth with long-term recovery support.
- Enhance the specialized after care standard to support the use of recovery coaches/communities for youth who would benefit from recovery in lieu of specialized aftercare treatment.
- Consider exhausting all community resources to meet the youth's needs before beginning a process to place youth back into a high restriction setting, resulting in fewer parole revocation hearings.

Finally, the Workforce Development and Reentry Support Specialist positions were moved under the purview of reentry system and parole operations to assist youth in their community reentry process, including successfully entering the workforce, maintaining employment, accessing community services and becoming self-sufficient upon discharge from the agency's custody or release under supervision.

Recidivism

The impact of reentry planning and services provided to juveniles after release was measured by tracking subsequent arrests and incarcerations for juveniles released from residential programs into the community, either on parole or by agency discharge. Re-incarceration rate is defined as the percentage of juveniles released from residential programs who, within one (1) or three (3) years of release, are known to be re-incarcerated to a state-operated, secure juvenile correctional facility or adult state prison or jail facility for a disciplinary purpose and other than through a temporary placement. The measure includes felonies, misdemeanors, and technical violations. Re-arrest rate is defined as the percentage of juveniles released from residential programs who, within one (1) or three (3) years, are re-arrested. This includes felonies, as well as Class A and Class B misdemeanors. Recidivism rates will not match previously reported rates due to changes in definition, timing, and other factors.

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 ONE YEAR RECIDIVISM RATES BY YEAR AND SEX

Fiscal Year Released	Sex	Total # Released	% 1-Yr Rearrest	% 1-Yr Violent Rearrest	% 1-Yr Reincarceration
2010	FEMALE	95	36.8	4.2	16.8
	MALE	1034	53.2	12.4	18.0
	ALL	1129	51.8	11.7	17.9
2011	FEMALE	77	35.1	3.9	15.6
	MALE	870	52.3	12.9	15.4
	ALL	947	50.9	12.1	15.4
2012	FEMALE	81	30.9	8.6	17.3
	MALE	746	49.6	9.4	15.3
	ALL	827	47.8	9.3	15.5
2013	FEMALE	58	24.1	.	13.8
	MALE	705	46.1	8.9	14.6
	ALL	763	44.4	8.3	14.6
2014	FEMALE	61	19.7	3.3	18.0
	MALE	711	47.7	12.0	14.5
	ALL	772	45.5	11.3	14.8
2015	FEMALE	60	25.0	.	28.3
	MALE	623	47.8	10.6	17.7
	ALL	683	45.8	9.7	18.6
2016	FEMALE	63	22.2	1.6	11.1
	MALE	622	49.0	12.7	15.0
	ALL	685	46.6	11.7	14.6

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2014
THREE YEAR RECIDIVISM RATES
BY YEAR AND SEX

Fiscal Year Released	Sex	Total # Released	% Rearrested w/in 3 Years	% Rearrested w/in 3 Years for Violent Offense	% Reincarcerated w/in 3 Years
2010	FEMALE	95	62.1	7.4	19.0
	MALE	1034	80.3	29.0	41.4
	ALL	1129	78.7	27.2	39.5
2011	FEMALE	77	64.9	10.4	27.3
	MALE	870	78.3	27.7	40.6
	ALL	947	77.2	26.3	39.5
2012	FEMALE	81	58.0	13.6	22.2
	MALE	746	78.6	23.9	36.3
	ALL	827	76.5	22.9	35.0
2013	FEMALE	58	53.5	10.3	15.5
	MALE	705	72.2	23.0	34.6
	ALL	763	70.8	22.0	33.2
2014	FEMALE	61	47.5	8.2	32.8
	MALE	711	73.6	26.3	38.0
	ALL	772	71.5	24.9	37.6

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NEXT STEPS

The agency has systemic issues that YICPM initiatives are addressing cross divisionally in a way that will impact youth outcomes positively. These include:

- Refining the assessment, referral and tracking process for family counseling and reunification services to improve pairing families with the appropriate resources.
- Employ the assigned Reducing Ethnic and Racial Disparity groups to help identify trends at respective institutions with proposed solutions to help continue reduction of any racial and ethnic disparities in service delivery and youth interaction.
- Improving the case management system to refine the process where individual youth plans flow directly from the Orientation and Assessment process and include family, the youth and members of the youth multi-disciplinary team.
- Training and requiring case managers and multi-disciplinary teams to use a strengths based approach in their work with youth.
- Improve service treatment delivery with training for mental health professionals and other direct care staff on Dialectical Behavioral Training for improved skill building and coping skills in youth anticipating reduced incidents of self-harm and acting out.
- Continue efforts to increase mentoring matches for youth and increase the number of mentors from youth's home community to improve follow up post-release and while on parole.
- Work towards abolition of room confinement for any circumstance other than immediate risk of harm.
- Continue to improve the visitation areas at facilities to encourage and promote positive, healthy interaction between youth and their families.
- Improve available resources and training for employees to provide positive structured programming during hours outside education classes. The focus of these activities will be improving physical health, teambuilding and social skill building.
- Implementing updates to parole operations policies and procedures which move the agency toward best practices, including changes to electronic monitoring criteria, discharge eligibility criteria, enhanced contacts with youth family while the youth is in residential placement, and examining outcomes based upon these changes.
- Developing and routinizing use of a Reentry video which focuses youth on reentry goals from the time of admission.
- Implementing reentry financial assistance to youth in need of such assistance to take continuing education classes, participate in leisure skills programs tied to their reentry plan, and pay for work-related items (such as tool and clothing).
- Developing and implementing a soft skills curriculum package that prepares the youth to live independently using the best material from all currently available TJJD resources. The package will have a staff guide, so that modules can be taught in group by virtually anyone, after a bit of training. The package will have pre and posttests so that youth can get "credit" for completion, test out of materials that they already know, and so that TJJD can track outcomes for youth who complete the curriculum. Qualifications for the reentry financial assistance may be tied to successful completion of some or all of the modules once complete.

- Increasing collaboration between halfway houses and parole offices to facilitate a more streamlined and fluid step down process for youth.
- Enhancing the halfway house programs that support a positive youth development model.
- Implementation of a recovery system of care for youth who have completed residential alcohol and drug treatment that includes peer coaches, recovery communities, use of Oxford Houses and other recovery housing models, and exploring enrollment in Recovery High Schools.
- Increasing partnerships with other agencies (such as the Health and Human Services Commission) and community organizations to address special needs youth, housing assistance, youth homelessness, and education and workforce development.

CONCLUSION

As noted previously, TJJD embarked on a project with outside stakeholders to improve all areas of the agency, with an intent toward developing increasingly safer, developmentally responsive living environments in its programs. This project, the Youth in Custody Practice Model has specific focus on youth case planning, services and support during facility placement, transition planning and re-entry as well as providing youth support on their return to the community. This resulted in exhaustive agency self-evaluation and development of work plans for service improvement, elements of which we continue to implement.

TJJD continued implementation of its internally developed Violent Offender Program to serve youth who have committed violent offenses but whose needs don't rise to the level of the intensive services provided in the Capital and Violent Serious Offender program. This allows the agency to further the plan to provide the correct level of treatment based on the risks, needs, responsivity model and ensure youth are served timely without unnecessary delays in both programs.

TJJD improved specialized treatment completion rates in 2017 and enrollment rates. 99% of TJJD youth were enrolled in high or moderate intensity specialized treatment prior to their release, meaning each had the opportunity to receive treatment they are assessed to need. Improvements in successful completion rates are a reflection of the agency staff working to address youth needs individually, make appropriate modifications based on educational, emotional and/or mental health needs to adjust the program for the specific youth while maintaining fidelity to the treatment program. The agencies high completion rates for capital and serious violent offender (94.3% for males and 90.6%) for females are reflected in the low rates of re-arrest for violent offenses in both the one year and three year recidivism rates. This data is critically important because overall recidivism is calculated to include arrests for felonies and misdemeanors and technical parole violations (many of which are not law violations).

The agency recidivism rates were provided in detail by completion of specialized treatment programs and we continue to provide one and three year re-arrest and re-incarceration rates. It is significant to note that the one year re-arrest rate for all youth in 2010 was 51.8%, however only 11.7% of those arrests were for violent offenses and 17.9% were re-incarcerated. In 2017, we provide data for all youth released by 2016 from the agency and the one year re-arrest rate dropped to 46.6% with 11.7% being an arrest for a violent offense and 14.6% actually being re-incarcerated. One year re-arrest rates remain higher than desired, however they have dropped by 5% over the past five years. One year re-incarceration rates have dropped below 15%. Three year re-arrest and re-incarceration rates have dropped by 7% in the same time frame.

Finally, TJJD youth did well in education with 43.11% completing their High School diploma or GED within 90 days of their release from TJJD. In our summary of youth characteristics, we share that most youth come into the agency on average 3.8 years behind in reading. 20.17% left the agency reading at grade level, meaning on average those 20% caught up on four grade levels in reading during an average length of stay of approximately 16 months. 33.83% of our students also earned industrial certifications which are instrumental in attaining employment. Completion of college courses increased significantly

from five years ago and one year ago with 136 youth completing 295 college courses during their time in TJJD.

TJJD is working to fully implement all elements of the Youth In Custody Practice Model and looks forward to the opportunity to share continued improvements in youth outcomes while remaining committed to the agency mission.

Appendix A – Alcohol & Other Drug Treatment Program
MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY AOD TREATMENT NEED

	NEED FOR AOD TREATMENT									ALL
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	191	18.44	595	57.43	27	2.61	223	21.53	1036	100
2011	238	27.32	397	45.58	115	13.2	121	13.89	871	100
2012	220	29.41	345	46.12	114	15.24	69	9.22	748	100
2013	250	35.41	272	38.53	106	15.01	78	11.05	706	100
2014	280	39.22	305	42.72	78	10.92	51	7.14	714	100
2015	271	43.36	235	37.6	70	11.2	49	7.84	625	100
2016	259	41.57	240	38.52	64	10.27	60	9.63	623	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY AOD TREATMENT NEED

	NEED FOR AOD TREATMENT									ALL
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	19	19.79	30	31.25	5	5.21	42	43.75	96	100
2011	17	21.79	16	20.51	12	15.38	33	42.31	78	100
2012	25	30.86	23	28.4	9	11.11	24	29.63	81	100
2013	18	31.03	26	44.83	6	10.34	8	13.79	58	100
2014	27	44.26	21	34.43	9	14.75	4	6.56	61	100
2015	28	46.67	18	30	4	6.67	10	16.67	60	100
2016	41	65.08	16	25.4	1	1.59	5	7.94	63	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
AOD TREATMENT ENROLLMENT

	ENROLLMENT IN AOD TREATMENT									ALL
	1. HIGH		2. MODERATE			3. LOW		4. NONE		
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	336	41.33	41	5.04	96	11.81	340	41.82	813	100
2011	295	39.33	267	35.6	49	6.53	139	18.53	750	100
2012	241	35.49	328	48.31	37	5.45	73	10.75	679	100
2013	262	41.72	269	42.83	32	5.1	65	10.35	628	100
2014	275	41.48	317	47.81	15	2.26	56	8.45	663	100
2015	254	44.1	255	44.27	11	1.91	56	9.72	576	100
2016	254	45.12	242	42.98	13	2.31	54	9.59	563	100

ONLY YOUTH WITH NEED FOR AOD TREATMENT INCLUDED

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
AOD TREATMENT ENROLLMENT

	ENROLLMENT IN AOD TREATMENT									ALL
	1. HIGH		2. MODERATE			3. LOW		4. NONE		
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	20	37.04	8	14.81	4	7.41	22	40.74	54	100
2011	22	48.89	9	20	3	6.67	11	24.44	45	100
2012	24	42.11	25	43.86	1	1.75	7	12.28	57	100
2013	17	34	28	56	.	.	5	10	50	100
2014	26	45.61	23	40.35	1	1.75	7	12.28	57	100
2015	28	56	18	36	.	.	4	8	50	100
2016	40	68.97	17	29.31	1	1.72	.	.	58	100

ONLY YOUTH WITH NEED FOR AOD TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
AOD TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED LOW INTENSITY														
	NO	1	9.1	1	10	4	25	5	38.5	1	100	7	77.8	10	71.4
F	YES	10	90.9	9	90	12	75	8	61.5	.	.	2	22.2	4	28.6
	NO	24	14.4	50	34	27	24.3	15	18.5	15	19.2	23	30.7	17	20
M	YES	143	85.6	97	66	84	75.7	66	81.5	63	80.8	52	69.3	68	80
	COMPLETED LOW INTENSITY														
ALL	NO	25	14	51	32.5	31	24.4	20	21.3	16	20.3	30	35.7	27	27.3
	YES	153	86	106	67.5	96	75.6	74	78.7	63	79.7	54	64.3	72	72.7

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
AOD TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED MODERATE INTENSITY														
F	NO	3	25	4	23.5	5	13.5	5	12.5	5	17.9	6	23.1	5	16.7
	YES	9	75	13	76.5	32	86.5	35	87.5	23	82.1	20	76.9	25	83.3
M	NO	20	24.4	51	14.4	50	11.7	45	11.7	40	9.6	32	9.2	38	10.5
	YES	62	75.6	304	85.6	377	88.3	341	88.3	378	90.4	314	90.8	325	89.5
ALL	COMPLETED MODERATE INTENSITY														
	NO	23	24.5	55	14.8	55	11.9	50	11.7	45	10.1	38	10.2	43	10.9
	YES	71	75.5	317	85.2	409	88.1	376	88.3	401	89.9	334	89.8	350	89.1

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
AOD TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED HIGH INTENSITY														
F	NO	19	86.4	17	68	12	50	3	17.6	16	61.5	5	17.9	9	22.5
	YES	3	13.6	8	32	12	50	14	82.4	10	38.5	23	82.1	31	77.5
M	NO	73	21.6	42	14.2	25	10.4	33	12.6	27	9.8	32	12.6	29	11.4
	YES	265	78.4	254	85.8	216	89.6	229	87.4	249	90.2	222	87.4	225	88.6
ALL	COMPLETED HIGH INTENSITY														
	NO	92	25.6	59	18.4	37	14	36	12.9	43	14.2	37	13.1	38	12.9
	YES	268	74.4	262	81.6	228	86	243	87.1	259	85.8	245	86.9	256	87.1

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

Appendix B – Capital Serious Violent Offender Treatment Program

Male and female youth are combined in the tables below due to the low number of females enrolled in violent offender treatment programs. Within this report, results for TJJD's Violent Offender and Aggression Replacement Training programs are included in results for the Capital and Serious Violent Offender program.

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY CSVOTP TREATMENT NEED

	NEED FOR CSVOTP TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	2	0.18	58	5.12	65	5.74	1007	88.96	1132	100
2011	17	1.79	303	31.93	314	33.09	315	33.19	949	100
2012	20	2.41	257	31	445	53.68	107	12.91	829	100
2013	25	3.27	289	37.83	388	50.79	62	8.12	764	100
2014	15	1.94	435	56.13	294	37.94	31	4	775	100
2015	31	4.53	440	64.23	185	27.01	29	4.23	685	100
2016	41	5.98	445	64.87	121	17.64	79	11.52	686	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY CSVOTP TREATMENT ENROLLMENT

	ENROLLMENT IN CSVOTP TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	.	.	6	4.8	7	5.6	112	89.6	125	100
2011	12	1.89	266	41.96	35	5.52	321	50.63	634	100
2012	21	2.91	318	44.04	58	8.03	325	45.01	722	100
2013	30	4.27	344	49	19	2.71	309	44.02	702	100
2014	18	2.42	491	65.99	10	1.34	225	30.24	744	100
2015	29	4.42	490	74.7	13	1.98	124	18.9	656	100
2016	40	6.59	480	79.08	6	0.99	81	13.34	607	100

ONLY YOUTH WITH NEED FOR CSVOTP TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
CAPITAL SERIOUS VIOLENT OFFENDER TREATMENT PROGRAM
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED LOW INTENSITY														
NO	20	19.8	15	16.7	7	9.9	4	12.5	15	39.5	59	77.6	30	55.6
YES	81	80.2	75	83.3	64	90.1	28	87.5	23	60.5	17	22.4	24	44.4

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
CAPITAL SERIOUS VIOLENT OFFENDER TREATMENT PROGRAM
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED MODERATE INTENSITY														
NO	7	43.8	43	14.4	42	12	35	9.3	47	9.3	29	5.6	32	6
YES	9	56.3	255	85.6	308	88	340	90.7	458	90.7	492	94.4	501	94

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
CAPITAL SERIOUS VIOLENT OFFENDER TREATMENT PROGRAM
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED HIGH INTENSITY														
NO	7	100	12	66.7	21	80.8	18	56.3	11	61.1	13	44.8	14	35
YES	.	.	6	33.3	5	19.2	14	43.8	7	38.9	16	55.2	26	65

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

Appendix C – Mental Health

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY MENTAL HEALTH TREATMENT NEED

	NEED FOR MENTAL HEALTH TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	60	5.79	243	23.46	45	4.34	688	66.41	1036	100
2011	54	6.2	90	10.33	217	24.91	510	58.55	871	100
2012	54	7.22	73	9.76	167	22.33	454	60.7	748	100
2013	56	7.93	63	8.92	184	26.06	403	57.08	706	100
2014	50	7	94	13.17	184	25.77	386	54.06	714	100
2015	30	4.8	77	12.32	194	31.04	324	51.84	625	100
2016	25	4.01	88	14.13	191	30.66	319	51.2	623	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY MENTAL HEALTH TREATMENT NEED

	NEED FOR MENTAL HEALTH TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	5	5.21	46	47.92	4	4.17	41	42.71	96	100
2011	6	7.69	16	20.51	23	29.49	33	42.31	78	100
2012	4	4.94	14	17.28	33	40.74	30	37.04	81	100
2013	2	3.45	23	39.66	15	25.86	18	31.03	58	100
2014	1	1.64	41	67.21	9	14.75	10	16.39	61	100
2015	5	8.33	28	46.67	13	21.67	14	23.33	60	100
2016	2	3.17	36	57.14	9	14.29	16	25.4	63	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY MENTAL HEALTH TREATMENT ENROLLMENT

	ENROLLED IN MENTAL HEALTH TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	90	25.86	72	20.69	60	17.24	126	36.21	348	100
2011	110	30.47	74	20.5	98	27.15	79	21.88	361	100
2012	81	27.55	88	29.93	75	25.51	50	17.01	294	100
2013	79	26.07	87	28.71	75	24.75	62	20.46	303	100
2014	71	21.65	113	34.45	89	27.13	55	16.77	328	100
2015	40	13.29	119	39.53	99	32.89	43	14.29	301	100
2016	29	9.54	149	49.01	106	34.87	20	6.58	304	100

ONLY YOUTH WITH NEED FOR MH TREATMENT INCLUDED

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY MENTAL HEALTH TREATMENT ENROLLMENT

	ENROLLED IN MENTAL HEALTH TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	7	12.73	5	9.09	11	20	32	58.18	55	100
2011	8	17.78	12	26.67	19	42.22	6	13.33	45	100
2012	7	13.73	29	56.86	.	.	15	29.41	51	100
2013	2	5	27	67.5	6	15	5	12.5	40	100
2014	1	1.96	34	66.67	13	25.49	3	5.88	51	100
2015	5	10.87	29	63.04	8	17.39	4	8.7	46	100
2016	2	4.26	35	74.47	8	17.02	2	4.26	47	100

ONLY YOUTH WITH NEED FOR MH TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
MENTAL HEALTH TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED LOW INTENSITY														
F	NO	17	63	41	85.4	8	88.9	21	87.5	29	59.2	20	41.7	31	66
	YES	10	37	7	14.6	1	11.1	3	12.5	20	40.8	28	58.3	16	34
M	NO	134	58	211	61.5	181	62.4	151	61.1	211	61.5	224	62.2	177	41.9
	YES	97	42	132	38.5	109	37.6	96	38.9	132	38.5	136	37.8	245	58.1
ALL	COMPLETED LOW INTENSITY														
	NO	151	58.5	252	64.5	189	63.2	172	63.5	240	61.2	244	59.8	208	44.3
	YES	107	41.5	139	35.5	110	36.8	99	36.5	152	38.8	164	40.2	261	55.7

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
MENTAL HEALTH TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED MODERATE INTENSITY														
F	NO	6	46.2	9	36	20	45.5	7	17.9	8	21.1	9	24.3	8	20.5
	YES	7	53.8	16	64	24	54.5	32	82.1	30	78.9	28	75.7	31	79.5
M	NO	64	42.4	97	42.9	77	33.5	108	48	124	50.2	135	57.4	123	50.4
	YES	87	57.6	129	57.1	153	66.5	117	52	123	49.8	100	42.6	121	49.6
ALL	COMPLETED MODERATE INTENSITY														
	NO	70	42.7	106	42.2	97	35.4	115	43.6	132	46.3	144	52.9	131	46.3
	YES	94	57.3	145	57.8	177	64.6	149	56.4	153	53.7	128	47.1	152	53.7

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
MENTAL HEALTH TREATMENT PROGRAM
TREATMENT COMPLETION

		RLFY													
		2010		2011		2012		2013		2014		2015		2016	
		#	%	#	%	#	%	#	%	#	%	#	%	#	%
SEX	COMPLETED HIGH INTENSITY														
	NO	10	83.3	7	87.5	4	50	1	50	.	.	2	40	.	.
F	YES	2	16.7	1	12.5	4	50	1	50	1	100	3	60	2	100
	NO	76	81.7	100	83.3	41	46.1	43	49.4	23	31.5	21	47.7	18	58.1
M	YES	17	18.3	20	16.7	48	53.9	44	50.6	50	68.5	23	52.3	13	41.9
	COMPLETED HIGH INTENSITY														
ALL	NO	86	81.9	107	83.6	45	46.4	44	49.4	23	31.1	23	46.9	18	54.5
	YES	19	18.1	21	16.4	52	53.6	45	50.6	51	68.9	26	53.1	15	45.5

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

Appendix D – Sexual Behavior Treatment Program

Male and female youth are combined in the tables below due to the low number of females enrolled in sexual behavior treatment.

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY SEX OFFENDER TREATMENT NEED

	NEED FOR SEX OFFENDER TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	7	0.62	10	0.88	12	1.06	1103	97.44	1132	100
2011	62	6.53	36	3.79	36	3.79	815	85.88	949	100
2012	72	8.69	38	4.58	42	5.07	677	81.66	829	100
2013	72	9.42	41	5.37	35	4.58	616	80.63	764	100
2014	64	8.26	45	5.81	48	6.19	618	79.74	775	100
2015	71	10.36	34	4.96	55	8.03	525	76.64	685	100
2016	77	11.22	25	3.64	68	9.91	516	75.22	686	100

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 BY SEX OFFENDER TREATMENT ENROLLMENT

	ENROLLED IN SEX OFFENDER TREATMENT								ALL	
	1. HIGH		2. MODERATE		3. LOW		4. NONE			
Fiscal Year Released	#	%	#	%	#	%	#	%	#	%
2010	11	37.93	8	27.59	1	3.45	9	31.03	29	100
2011	64	47.76	39	29.1	5	3.73	26	19.4	134	100
2012	72	47.37	52	34.21	4	2.63	24	15.79	152	100
2013	71	47.97	52	35.14	1	0.68	24	16.22	148	100
2014	63	40.13	54	34.39	3	1.91	37	23.57	157	100
2015	73	45.63	42	26.25	6	3.75	39	24.38	160	100
2016	81	47.65	29	17.06	2	1.18	58	34.12	170	100

ONLY YOUTH WITH NEED FOR SEX OFFENDER TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY SBTP TREATMENT ENROLLMENT
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED LOW INTENSITY														
NO	1	8.3	7	26.9	4	21.1	8	50	3	27.3	6	37.5	10	71.4
YES	11	91.7	19	73.1	15	78.9	8	50	8	72.7	10	62.5	4	28.6

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY SBTP TREATMENT ENROLLMENT
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED MODERATE INTENSITY														
NO	4	17.4	9	14.8	23	23.7	21	22.1	20	21.1	20	22.5	26	28.3
YES	19	82.6	52	85.2	74	76.3	74	77.9	75	78.9	69	77.5	66	71.7

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
BY SBTP TREATMENT ENROLLMENT
TREATMENT COMPLETION

	RLFY													
	2010		2011		2012		2013		2014		2015		2016	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
COMPLETED HIGH INTENSITY														
NO	10	27	17	24.3	19	25.7	21	29.6	21	33.3	15	20.5	14	17.3
YES	27	73	53	75.7	55	74.3	50	70.4	42	66.7	58	79.5	67	82.7

ONLY YOUTH ENROLLED IN TREATMENT INCLUDED

Appendix E – Alcohol and Other Drug Treatment Program Recidivism

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR REARREST RATE
BY LEVEL OF AOD TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	141	41.72	197	58.28	338	100
	MODERATE	22	53.66	19	46.34	41	100
	LOW	62	48.06	67	51.94	129	100
2011	HIGH	134	45.27	162	54.73	296	100
	MODERATE	111	41.57	156	58.43	267	100
	LOW	37	52.11	34	47.89	71	100
2012	HIGH	96	40.17	143	59.83	239	100
	MODERATE	162	49.09	168	50.91	330	100
	LOW	31	64.58	17	35.42	48	100
2013	HIGH	109	41.6	153	58.4	262	100
	MODERATE	146	53.87	125	46.13	271	100
	LOW	31	72.09	12	27.91	43	100
2014	HIGH	123	45.05	150	54.95	273	100
	MODERATE	166	52.04	153	47.96	319	100
	LOW	15	68.18	7	31.82	22	100
2015	HIGH	117	46.06	137	53.94	254	100
	MODERATE	129	50.79	125	49.21	254	100
	LOW	10	50	10	50	20	100
2016	HIGH	114	44.88	140	55.12	254	100
	MODERATE	125	50.4	123	49.6	248	100
	LOW	11	57.89	8	42.11	19	100

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR REARREST RATE
BY LEVEL OF AOD TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	13	61.9	8	38.1	21	100
	MODERATE	5	50	5	50	10	100
	LOW	6	66.67	3	33.33	9	100
2011	HIGH	12	50	12	50	24	100
	MODERATE	10	76.92	3	23.08	13	100
	LOW	5	55.56	4	44.44	9	100
2012	HIGH	15	62.5	9	37.5	24	100
	MODERATE	18	69.23	8	30.77	26	100
	LOW	3	75	1	25	4	100
2013	HIGH	11	64.71	6	35.29	17	100
	MODERATE	23	79.31	6	20.69	29	100
	LOW	.	.	.	.	.	.
2014	HIGH	21	80.77	5	19.23	26	100
	MODERATE	18	78.26	5	21.74	23	100
	LOW	1	100	.	.	1	100
2015	HIGH	24	85.71	4	14.29	28	100
	MODERATE	12	66.67	6	33.33	18	100
	LOW	1	100	.	.	1	100
2016	HIGH	31	77.5	9	22.5	40	100
	MODERATE	14	82.35	3	17.65	17	100
	LOW	2	100	.	.	2	100

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR VIOLENT REARREST RATE
BY LEVEL OF AOD TREATMENT

		1-YR VIOLENT REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	299	88.46	39	11.54	338	100
	MODERATE	37	90.24	4	9.76	41	100
	LOW	121	93.8	8	6.2	129	100
2011	HIGH	262	88.51	34	11.49	296	100
	MODERATE	217	81.27	50	18.73	267	100
	LOW	64	90.14	7	9.86	71	100
2012	HIGH	214	89.54	25	10.46	239	100
	MODERATE	297	90	33	10	330	100
	LOW	45	93.75	3	6.25	48	100
2013	HIGH	238	90.84	24	9.16	262	100
	MODERATE	240	88.56	31	11.44	271	100
	LOW	40	93.02	3	6.98	43	100
2014	HIGH	240	87.91	33	12.09	273	100
	MODERATE	280	87.77	39	12.23	319	100
	LOW	20	90.91	2	9.09	22	100
2015	HIGH	229	90.16	25	9.84	254	100
	MODERATE	224	88.19	30	11.81	254	100
	LOW	18	90	2	10	20	100
2016	HIGH	217	85.43	37	14.57	254	100
	MODERATE	217	87.5	31	12.5	248	100
	LOW	17	89.47	2	10.53	19	100

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR VIOLENT REARREST RATE
BY LEVEL OF AOD TREATMENT

		1-YR VIOLENT REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	21	100	.	.	21	100
	MODERATE	10	100	.	.	10	100
	LOW	9	100	.	.	9	100
2011	HIGH	24	100	.	.	24	100
	MODERATE	13	100	.	.	13	100
	LOW	9	100	.	.	9	100
2012	HIGH	22	91.67	2	8.33	24	100
	MODERATE	25	96.15	1	3.85	26	100
	LOW	4	100	.	.	4	100
2013	HIGH	17	100	.	.	17	100
	MODERATE	29	100	.	.	29	100
	LOW	.	.	.	.	.	.
2014	HIGH	26	100	.	.	26	100
	MODERATE	21	91.3	2	8.7	23	100
	LOW	1	100	.	.	1	100
2015	HIGH	28	100	.	.	28	100
	MODERATE	18	100	.	.	18	100
	LOW	1	100	.	.	1	100
2016	HIGH	39	97.5	1	2.5	40	100
	MODERATE	17	100	.	.	17	100
	LOW	2	100	.	.	2	100

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR REINCARCERATION RATE
BY LEVEL OF AOD TREATMENT

		1-YR REINCARCERATION				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	263	77.81	75	22.19	338	100
	MODERATE	34	82.93	7	17.07	41	100
	LOW	109	84.5	20	15.5	129	100
2011	HIGH	243	82.09	53	17.91	296	100
	MODERATE	223	83.52	44	16.48	267	100
	LOW	65	91.55	6	8.45	71	100
2012	HIGH	198	82.16	43	17.84	241	100
	MODERATE	284	86.06	46	13.94	330	100
	LOW	40	81.63	9	18.37	49	100
2013	HIGH	217	82.82	45	17.18	262	100
	MODERATE	227	83.46	45	16.54	272	100
	LOW	39	90.7	4	9.3	43	100
2014	HIGH	234	84.78	42	15.22	276	100
	MODERATE	269	84.33	50	15.67	319	100
	LOW	22	100	.	.	22	100
2015	HIGH	193	75.98	61	24.02	254	100
	MODERATE	219	85.55	37	14.45	256	100
	LOW	17	80.95	4	19.05	21	100
2016	HIGH	215	84.65	39	15.35	254	100
	MODERATE	207	83.47	41	16.53	248	100
	LOW	15	78.95	4	21.05	19	100

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN AOD TREATMENT
ONE YEAR REINCARCERATION RATE
BY LEVEL OF AOD TREATMENT

		1-YR REINCARCERATION				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF AOD TRT						
2010	HIGH	19	86.36	3	13.64	22	100
	MODERATE	9	90	1	10	10	100
	LOW	9	100	.	.	9	100
2011	HIGH	21	84	4	16	25	100
	MODERATE	11	84.62	2	15.38	13	100
	LOW	7	77.78	2	22.22	9	100
2012	HIGH	19	79.17	5	20.83	24	100
	MODERATE	20	76.92	6	23.08	26	100
	LOW	4	100	.	.	4	100
2013	HIGH	14	82.35	3	17.65	17	100
	MODERATE	25	86.21	4	13.79	29	100
	LOW	.	.	.	.	.	.
2014	HIGH	23	88.46	3	11.54	26	100
	MODERATE	18	78.26	5	21.74	23	100
	LOW	1	100	.	.	1	100
2015	HIGH	20	71.43	8	28.57	28	100
	MODERATE	12	66.67	6	33.33	18	100
	LOW	.	.	1	100	1	100
2016	HIGH	36	90	4	10	40	100
	MODERATE	14	82.35	3	17.65	17	100
	LOW	2	100	.	.	2	100

Appendix F – Capital Serious Violent Offender Treatment Program Recidivism

Note, male and female youth are combined in the tables below due to the low number of females enrolled in violent offender treatment programs. Within this report, results for TJJD’s Violent Offender and Aggression Replacement Training programs are included in results for the Capital and Serious Violent Offender program.

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 ENROLLED IN CSVOTP TREATMENT ONE YEAR REARREST RATE BY LEVEL OF CSVOTP TREATMENT

FISCAL YEAR RELEASED	LEVEL OF CSVOTP TRT	1-YR REARREST				ALL	
		NO		YES		#	%
		#	%	#	%		
2010	HIGH	3	42.86	4	57.14	7	100
	MODERATE	9	60	6	40	15	100
	LOW	47	48.45	50	51.55	97	100
2011	HIGH	14	77.78	4	22.22	18	100
	MODERATE	129	45.1	157	54.9	286	100
	LOW	43	61.43	27	38.57	70	100
2012	HIGH	17	65.38	9	34.62	26	100
	MODERATE	153	46.93	173	53.07	326	100
	LOW	37	61.67	23	38.33	60	100
2013	HIGH	25	78.13	7	21.88	32	100
	MODERATE	162	46.82	184	53.18	346	100
	LOW	15	75	5	25	20	100
2014	HIGH	14	77.78	4	22.22	18	100
	MODERATE	251	51.12	240	48.88	491	100
	LOW	6	60	4	40	10	100
2015	HIGH	17	58.62	12	41.38	29	100
	MODERATE	247	50.1	246	49.9	493	100
	LOW	13	81.25	3	18.75	16	100
2016	HIGH	30	75	10	25	40	100
	MODERATE	256	51.2	244	48.8	500	100
	LOW	5	71.43	2	28.57	7	100

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN CSVOTP TREATMENT
ONE YEAR VIOLENT REARREST RATE
BY LEVEL OF CSVOTP TREATMENT

		1-YR VIOLENT REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF CSVOTP TRT						
2010	HIGH	6	85.71	1	14.29	7	100
	MODERATE	13	86.67	2	13.33	15	100
	LOW	85	87.63	12	12.37	97	100
2011	HIGH	17	94.44	1	5.56	18	100
	MODERATE	245	85.66	41	14.34	286	100
	LOW	62	88.57	8	11.43	70	100
2012	HIGH	23	88.46	3	11.54	26	100
	MODERATE	284	87.12	42	12.88	326	100
	LOW	56	93.33	4	6.67	60	100
2013	HIGH	32	100	.	.	32	100
	MODERATE	309	89.31	37	10.69	346	100
	LOW	19	95	1	5	20	100
2014	HIGH	15	83.33	3	16.67	18	100
	MODERATE	422	85.95	69	14.05	491	100
	LOW	9	90	1	10	10	100
2015	HIGH	27	93.1	2	6.9	29	100
	MODERATE	440	89.25	53	10.75	493	100
	LOW	16	100	.	.	16	100
2016	HIGH	35	87.5	5	12.5	40	100
	MODERATE	437	87.4	63	12.6	500	100
	LOW	6	85.71	1	14.29	7	100

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN CSVOTP TREATMENT
ONE YEAR REINCARCERATION RATE
BY LEVEL OF CSVOTP TREATMENT

		1-YR REINCARCERATION				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF CSVOTP TRT						
2010	HIGH	7	100	.	.	7	100
	MODERATE	12	80	3	20	15	100
	LOW	81	83.51	16	16.49	97	100
2011	HIGH	17	94.44	1	5.56	18	100
	MODERATE	227	79.37	59	20.63	286	100
	LOW	60	84.51	11	15.49	71	100
2012	HIGH	21	80.77	5	19.23	26	100
	MODERATE	270	82.32	58	17.68	328	100
	LOW	51	85	9	15	60	100
2013	HIGH	29	90.63	3	9.38	32	100
	MODERATE	287	82.95	59	17.05	346	100
	LOW	16	80	4	20	20	100
2014	HIGH	16	88.89	2	11.11	18	100
	MODERATE	421	85.05	74	14.95	495	100
	LOW	8	80	2	20	10	100
2015	HIGH	28	96.55	1	3.45	29	100
	MODERATE	389	78.43	107	21.57	496	100
	LOW	14	87.5	2	12.5	16	100
2016	HIGH	39	97.5	1	2.5	40	100
	MODERATE	414	82.8	86	17.2	500	100
	LOW	6	85.71	1	14.29	7	100

Appendix G – Mental Health Treatment Program Recidivism

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN MENTAL HEALTH TREATMENT
ONE YEAR REARREST RATE
BY LEVEL OF MENTAL HEALTH TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF MH TRT						
2010	HIGH	39	41.94	54	58.06	93	100
	MODERATE	62	49.21	64	50.79	126	100
	LOW	40	45.45	48	54.55	88	100
2011	HIGH	77	64.17	43	35.83	120	100
	MODERATE	66	46.15	77	53.85	143	100
	LOW	60	39.74	91	60.26	151	100
2012	HIGH	49	55.06	40	44.94	89	100
	MODERATE	73	48.03	79	51.97	152	100
	LOW	58	44.96	71	55.04	129	100
2013	HIGH	46	52.87	41	47.13	87	100
	MODERATE	76	51.7	71	48.3	147	100
	LOW	60	58.82	42	41.18	102	100
2014	HIGH	41	56.16	32	43.84	73	100
	MODERATE	87	49.15	90	50.85	177	100
	LOW	63	44.68	78	55.32	141	100
2015	HIGH	25	58.14	18	41.86	43	100
	MODERATE	101	52.6	91	47.4	192	100
	LOW	87	48.07	94	51.93	181	100
2016	HIGH	20	64.52	11	35.48	31	100
	MODERATE	114	53.27	100	46.73	214	100
	LOW	121	52.61	109	47.39	230	100

FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN MENTAL HEALTH TREATMENT
ONE YEAR REARREST RATE
BY LEVEL OF MENTAL HEALTH TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF MH TRT						
2010	HIGH	10	83.33	2	16.67	12	100
	MODERATE	4	44.44	5	55.56	9	100
	LOW	8	57.14	6	42.86	14	100
2011	HIGH	5	62.5	3	37.5	8	100
	MODERATE	12	66.67	6	33.33	18	100
	LOW	12	50	12	50	24	100
2012	HIGH	6	75	2	25	8	100
	MODERATE	27	72.97	10	27.03	37	100
	LOW	1	50	1	50	2	100
2013	HIGH	1	50	1	50	2	100
	MODERATE	30	81.08	7	18.92	37	100
	LOW	6	66.67	3	33.33	9	100
2014	HIGH	1	100	.	.	1	100
	MODERATE	31	83.78	6	16.22	37	100
	LOW	11	73.33	4	26.67	15	100
2015	HIGH	3	60	2	40	5	100
	MODERATE	25	78.13	7	21.88	32	100
	LOW	9	64.29	5	35.71	14	100
2016	HIGH	1	50	1	50	2	100
	MODERATE	31	83.78	6	16.22	37	100
	LOW	11	68.75	5	31.25	16	100

MALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN MENTAL HEALTH TREATMENT
ONE YEAR VIOLENT REARREST RATE
BY LEVEL OF MENTAL HEALTH TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF MH TRT						
2010	HIGH	77	82.8	16	17.2	93	100
	MODERATE	113	89.68	13	10.32	126	100
	LOW	69	78.41	19	21.59	88	100
2011	HIGH	107	89.17	13	10.83	120	100
	MODERATE	128	89.51	15	10.49	143	100
	LOW	126	83.44	25	16.56	151	100
2012	HIGH	79	88.76	10	11.24	89	100
	MODERATE	139	91.45	13	8.55	152	100
	LOW	115	89.15	14	10.85	129	100
2013	HIGH	78	89.66	9	10.34	87	100
	MODERATE	137	93.2	10	6.8	147	100
	LOW	93	91.18	9	8.82	102	100
2014	HIGH	65	89.04	8	10.96	73	100
	MODERATE	150	84.75	27	15.25	177	100
	LOW	119	84.4	22	15.6	141	100
2015	HIGH	35	81.4	8	18.6	43	100
	MODERATE	179	93.23	13	6.77	192	100
	LOW	162	89.5	19	10.5	181	100
2016	HIGH	29	93.55	2	6.45	31	100
	MODERATE	183	85.51	31	14.49	214	100
	LOW	206	89.57	24	10.43	230	100

Appendix H – Sexual Behavior Treatment Program Recidivism

Note, male and female youth are combined in the tables below due to the low number of females enrolled in sexual behavior treatment.

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016 ENROLLED IN SBTP TREATMENT ONE YEAR REARREST RATE BY LEVEL OF SBTP TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF SBTP TRT						
2010	HIGH	23	63.89	13	36.11	36	100
	MODERATE	12	63.16	7	36.84	19	100
	LOW	1	25	3	75	4	100
2011	HIGH	50	71.43	20	28.57	70	100
	MODERATE	30	76.92	9	23.08	39	100
	LOW	6	33.33	12	66.67	18	100
2012	HIGH	56	76.71	17	23.29	73	100
	MODERATE	35	67.31	17	32.69	52	100
	LOW	7	70	3	30	10	100
2013	HIGH	56	78.87	15	21.13	71	100
	MODERATE	41	78.85	11	21.15	52	100
	LOW	4	57.14	3	42.86	7	100
2014	HIGH	53	84.13	10	15.87	63	100
	MODERATE	41	75.93	13	24.07	54	100
	LOW	5	83.33	1	16.67	6	100
2015	HIGH	58	79.45	15	20.55	73	100
	MODERATE	32	72.73	12	27.27	44	100
	LOW	5	41.67	7	58.33	12	100
2016	HIGH	62	77.5	18	22.5	80	100
	MODERATE	22	68.75	10	31.25	32	100
	LOW	6	60	4	40	10	100

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN SBTP TREATMENT
ONE YEAR VIOLENT REARREST RATE
BY LEVEL OF SBTP TREATMENT

		1-YR REARREST				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF SBTP TRT						
2010	HIGH	34	94.44	2	5.56	36	100
	MODERATE	17	89.47	2	10.53	19	100
	LOW	4	100	.	.	4	100
2011	HIGH	64	91.43	6	8.57	70	100
	MODERATE	38	97.44	1	2.56	39	100
	LOW	15	83.33	3	16.67	18	100
2012	HIGH	71	97.26	2	2.74	73	100
	MODERATE	50	96.15	2	3.85	52	100
	LOW	9	90	1	10	10	100
2013	HIGH	68	95.77	3	4.23	71	100
	MODERATE	49	94.23	3	5.77	52	100
	LOW	7	100	.	.	7	100
2014	HIGH	63	100	.	.	63	100
	MODERATE	51	94.44	3	5.56	54	100
	LOW	6	100	.	.	6	100
2015	HIGH	70	95.89	3	4.11	73	100
	MODERATE	39	88.64	5	11.36	44	100
	LOW	12	100	.	.	12	100
2016	HIGH	78	97.5	2	2.5	80	100
	MODERATE	31	96.88	1	3.13	32	100
	LOW	10	100	.	.	10	100

MALE AND FEMALE NEW ADMISSIONS SINCE FY2009, RELEASED BY FY2016
ENROLLED IN SBTP TREATMENT
ONE YEAR REINCARCERATION RATE
BY LEVEL OF SBTP TREATMENT

		1-YR REINCARCERATION				ALL	
		NO		YES			
		#	%	#	%	#	%
FISCAL YEAR RELEASED	LEVEL OF SBTP TRT						
2010	HIGH	29	78.38	8	21.62	37	100
	MODERATE	17	89.47	2	10.53	19	100
	LOW	4	100	.	.	4	100
2011	HIGH	64	91.43	6	8.57	70	100
	MODERATE	39	97.5	1	2.5	40	100
	LOW	14	77.78	4	22.22	18	100
2012	HIGH	70	94.59	4	5.41	74	100
	MODERATE	44	84.62	8	15.38	52	100
	LOW	6	60	4	40	10	100
2013	HIGH	68	95.77	3	4.23	71	100
	MODERATE	48	92.31	4	7.69	52	100
	LOW	7	100	.	.	7	100
2014	HIGH	60	95.24	3	4.76	63	100
	MODERATE	52	96.3	2	3.7	54	100
	LOW	6	100	.	.	6	100
2015	HIGH	67	91.78	6	8.22	73	100
	MODERATE	40	90.91	4	9.09	44	100
	LOW	9	75	3	25	12	100
2016	HIGH	79	97.53	2	2.47	81	100
	MODERATE	30	93.75	2	6.25	32	100
	LOW	10	100	.	.	10	100